

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF NEW YORK**

MIKE KLOPPPEL and ADAM WILSON on  
behalf of themselves and all other similarly  
situated persons,

Plaintiffs,

v.

HOMEDELIVERYLINK, INC.

Defendant.

Case No. 6:17-cv-06296-FPG

**DECLARATION OF EMILY A. QUILLEN**

I, Emily A. Quillen, declare as follows:

1. I am a partner at the law firm of Scopelitis, Garvin, Light, Hanson & Feary, P.C. I represent Defendant HomeDeliveryLink, Inc. in the above-captioned matter. I am an attorney licensed and in good standing in the State of Texas. I am admitted to practice in this Court.

2. Attached as **Exhibit 1** is a true and correct copy of Collins Home Delivery, Inc.'s Form 1120S and related schedules for tax years 2012, 2013, 2014, 2015, 2016, 2017, 2018, and 2019, produced in discovery in this case with Bates number MCOLLINS000001-85.<sup>1</sup>

3. Attached as **Exhibit 2** is a true and correct copy of Traina Services LLC's Form 1099-MISC for 2011, 2014, 2016, and Schedule C (Form 1040) for tax years 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, and 2019, produced in discovery in this case with Bates number TRAINA000001-22

4. Attached as **Exhibit 3** is a true and correct copy of Plaintiff Adam Wilson's Objections & Answer to HDL's First Set of Interrogatories, dated April 15, 2019.

5. Attached as **Exhibit 4** is a true and correct copy of Plaintiff Mike Kloppel's Objections & Answers to Defendant HDL's First Set of Interrogatories, dated April 15, 2019.

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<sup>1</sup> A redacted copy of Exhibits 1, 2 and 16 will be e-filed, while an unredacted copy is submitted together with a motion to seal.

6. Attached as **Exhibit 5** is a true and correct copy of Plaintiff David Traina's Responses to Defendant's First Set of Interrogatories, dated May 10, 2021.

7. Attached as **Exhibit 6** is a true and correct copy of HomeDeliveryLink Delivery Settlement Statements indicating Adam Wilson as driver for the weeks ending December 8, 2012, December 15, 2012, December 15, 2012, February 8, 2014, February 15, 2014, and May 17, 2014.

8. Attached as **Exhibit 7** is a true and correct copy of the Complaint in *Romero v. Garrido Company Truck, Inc. and Ivan W. Garrido*, Cause No. 2:16-cv-06234-ADS-SIL, filed November 9, 2016 in the United States District Court, Eastern District of New York.

9. Attached as **Exhibit 8** is a true and correct copy of an email from Plaintiffs' attorney, Samuel Alba, dated June 11, 2021.

10. Attached as **Exhibit 9** is a true and correct copy of an email from Plaintiffs' attorney, Benjamin J. Weber, dated August 2, 2021.

11. Attached as **Exhibit 10** is a true and correct copy of an email from Plaintiffs' attorney, Samuel Alba, dated July 12, 2021, together with excerpts of an attachment "class list 7.5.2021.xlsx".

12. Attached as **Exhibit 11** is a true and correct copy of HomeDeliveryLink Delivery Settlement Statements indicating Ivan Morgan as driver for 16 weeks over various dates.

13. Attached as **Exhibit 12** is a true and correct copy of HomeDeliveryLink Delivery Settlement Statements indicating Ivan Garrido as driver for 49 weeks over various dates.

14. Attached as **Exhibit 13** is a true and correct copy of HomeDeliveryLink Delivery Settlement Statements indicating David Traina as driver for the weeks ending December 23, 2017, March 31, 2018, April 28, 2018, and May 12, 2018.

15. Attached as **Exhibit 14** is a true and correct copy of HomeDeliveryLink Delivery Settlement Statements indicating Samora Minors as driver for 59 weeks over various dates.

16. Attached as **Exhibit 15** is a true and correct copy of Plaintiff Michael Collins' Responses to Defendant's First Set of Interrogatories, dated March 1, 2021.



17. Attached as **Exhibit 16** is a true and correct copy of Minors Contracting LLC's Schedule C (Form 1040) for tax years 2014 and 2015, and Form 1065 for tax years 2016, 2017, along with financial statements, balance sheets, and Form 1099s issued by and to Minors Contracting LLC, produced in discovery in this case with Bates number SMINORS000478-514.

18. Attached as **Exhibit 17** is a true and correct copy of the Deposition of Moses Bharath dated June 4, 2021.

19. Attached as **Exhibit 18** is a true and correct copy of the Deposition of Anthony Blattenberger taken June 29, 2021.

20. Attached as **Exhibit 19** is a true and correct copy of the Deposition of Michael Collins taken April 21, 2021.

21. Attached as **Exhibit 20** is a true and correct copy of excerpts of the Deposition of Sergio Coreas taken October 9, 2019.

22. Attached as **Exhibit 21** is a true and correct copy of excerpts of the Deposition of Michael Patrick Kloppel taken December 2, 2019.

23. Attached as **Exhibit 22** is a true and correct copy of the Deposition of Samora Minors taken April 16, 2021.

24. Attached as **Exhibit 23** is a true and correct copy of the Deposition of Eladio Bonilla Ramos taken June 1, 2021.

25. Attached as **Exhibit 24** is a true and correct copy of excerpts of the Deposition of Michael P. Rex taken August 28, 2019.

26. Attached as **Exhibit 25** is a true and correct copy of the Deposition of Everaldo Samuels taken June 21, 2021.

27. Attached as **Exhibit 26** is a true and correct copy of the Deposition of David Traina taken May 11, 2021.

28. Attached as **Exhibit 27** is a true and correct copy of excerpts of the Deposition of Adam D. Wilson taken December 3, 2019.

29. Attached as **Exhibit 28** is a true and correct copy of excerpts of the Deposition of Alex Dunlop taken October 9, 2019.

30. Attached as **Exhibit 29** is a true and correct copy of excerpts of the Deposition of Ricardo Sierra taken August 29, 2019.

I declare under penalty of perjury under the law of the United States of America that the foregoing is true and correct.

Executed this 7th day of September, 2021 at Fort Worth, Texas.

  
Emily A. Quillen

4832-3997-3881, v. 1

# EXHIBIT 1

Form <b>1120S</b> Department of the Treasury Internal Revenue Service (77)	<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.	OMB No. 1545-0130 <div style="font-size: 2em; font-weight: bold;">2011</div>
For calendar year 2011 or tax year beginning <b>MARCH 23, 2011</b> , and ending <b>DECEMBER 31, 2011</b>		
<b>A</b> S election effective date <b>03/23/2011</b>	<b>B</b> Business activity code number (see instructions) <b>492210</b>	<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>
<b>NAME</b> <b>COLLINS HOME DELIVERY, INC.</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b> City or town, state, and ZIP code <b>ROCHESTER, NY 14612</b>		<b>D</b> Employer identification number <b>**-*****</b> <b>E</b> Date incorporated <b>03/23/2011</b> <b>F</b> Total assets (see instructions) \$ <b>[REDACTED]</b>
<b>G</b> Is the corporation electing to be an S corporation beginning with this tax year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach Form 2553 if not already filed		
<b>H</b> Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation		
<b>I</b> Enter the number of shareholders who were shareholders during any part of the tax year <span style="float: right;">▶ <b>1</b></span>		
<b>Caution:</b> Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.		
<b>Income</b>	<b>1 a</b> Merchant card and third-party payment For 2011, enter -0- <b>0.</b> <b>b</b> Gross receipts or sales not reported on line 1a <b>[REDACTED]</b> <b>c</b> Total. Add lines 1a and 1b <b>[REDACTED]</b> <b>d</b> Returns and allowances plus any other adjustments (see instrs.) <b>[REDACTED]</b> <b>e</b> Subtract line 1d from line 1c <b>[REDACTED]</b> <b>2</b> Cost of goods sold (attach Form 1125-A) <b>[REDACTED]</b> <b>3</b> Gross profit. Subtract line 2 from line 1e <b>[REDACTED]</b> <b>4</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) <b>[REDACTED]</b> <b>5</b> Other income (loss) (attach statement) <b>[REDACTED]</b> <b>6</b> <b>Total income (loss).</b> Add lines 3 through 5 <b>[REDACTED]</b>	
<b>Deductions (See instructions for limitations)</b>	<b>7</b> Compensation of officers <b>STATEMENT 1</b> <b>8</b> Salaries and wages (less employment credits) <b>9</b> Repairs and maintenance <b>10</b> Bad debts <b>11</b> Rents <b>12</b> Taxes and licenses <b>STATEMENT 2</b> <b>13</b> Interest <b>14</b> Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562) <b>15</b> Depletion (Do not deduct oil and gas depletion.) <b>16</b> Advertising <b>17</b> Pension, profit-sharing, etc., plans <b>18</b> Employee benefit programs <b>19</b> Other deductions (attach statement) <b>STATEMENT 3</b> <b>20</b> <b>Total deductions.</b> Add lines 7 through 19 <b>[REDACTED]</b> <b>21</b> <b>Ordinary business income (loss).</b> Subtract line 20 from line 6 <b>[REDACTED]</b>	
<b>Tax and Payments</b>	<b>22 a</b> Excess net passive income or LIFO recapture tax (see instructions) <b>22a</b> <b>[REDACTED]</b> <b>b</b> Tax from Schedule D (Form 1120S) <b>22b</b> <b>[REDACTED]</b> <b>c</b> Add lines 22a and 22b <b>22c</b> <b>[REDACTED]</b> <b>23 a</b> 2011 estimated tax payments and 2010 overpayment credited to 2011 <b>23a</b> <b>[REDACTED]</b> <b>b</b> Tax deposited with Form 7004 <b>23b</b> <b>[REDACTED]</b> <b>c</b> Credit for federal tax paid on fuels (attach Form 4136) <b>23c</b> <b>[REDACTED]</b> <b>d</b> Add lines 23a through 23c <b>23d</b> <b>[REDACTED]</b> <b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> <b>25</b> <b>Amount owed.</b> If line 23d is smaller than the total of lines 22c and 24, enter amount owed <b>[REDACTED]</b> <b>26</b> <b>Overpayment.</b> If line 23d is larger than the total of lines 22c and 24, enter amount overpaid <b>[REDACTED]</b> <b>27</b> Enter amount from line 26 <b>Credited to 2012 estimated tax</b> <b>[REDACTED]</b> <b>Refunded</b> <b>[REDACTED]</b>	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
<b>Sign Here</b>	<div style="display: flex; justify-content: space-between;"> <div> <b>Signature of officer</b>  <b>PRESIDENT</b> </div> <div> <b>Date</b>  <b>11/20/12</b> </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div> <b>Print/Type preparer's name</b>  <b>RICK J. BUCCI, CPA</b> </div> <div> <b>Preparer's signature</b>  <b>RICK J. BUCCI, CPA</b> </div> <div> <b>Date</b>  <b>11/20/12</b> </div> <div> <b>Check if self-employed</b> <input checked="" type="checkbox"/> </div> <div> <b>PTIN</b>  <b>P00187264</b> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div> <b>Firm's name</b>  <b>RICK J. BUCCI, CPA</b> </div> <div> <b>Firm's EIN</b>  <b>[REDACTED]</b> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div> <b>Firm's address</b>  <b>491 WEST WHITNEY RD</b>  <b>PENFIELD, NY 14526</b> </div> <div> <b>Phone no.</b>  <b>585-230-5239</b> </div> </div>		

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For Paperwork Reduction Act Notice, see separate instructions.

Form 1120S (2011)

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2011.05080 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2011)		<b>COLLINS HOME DELIVERY, INC.</b>		***-***** Page 2	
<b>Schedule B Other Information</b> (see instructions)				Yes No	
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span>					
2 See the instructions and enter the:					
(a) Business activity <b>DELIVERY SERVICES</b> (b) Product or service <b>DELIVERY</b>					
3 At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a statement showing: (a) name and employer identification number (EIN), (b) percentage owned, and (c) if 100% owned, was a qualified subchapter S subsidiary election made?				X	
4 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, provide information on any reportable transaction?				X	
5 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.					
6 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years <span style="float: right;">\$ <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span></span>					
7 Enter the accumulated earnings and profits of the corporation at the end of the tax year <span style="float: right;">\$ <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span></span>					
8 Are the corporation's total receipts (see instructions) for the tax year and its total assets at the end of the tax year less than \$250,000? If "Yes," the corporation is not required to complete Schedules L and M-1				X	
9 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions				X	
10a Did the corporation make any payments in 2011 that would require it to file Form(s) 1099 (see instructions)?				X	
b If "Yes," did the corporation file or will it file all required Forms 1099?					
<b>Schedule K Shareholders' Pro Rata Share Items</b>			Total amount		
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)			1	
	2 Net rental real estate income (loss) (attach Form 8825)			2	
	3a Other gross rental income (loss)	3a			
	b Expenses from other rental activities (attach statement)	3b			
	c Other net rental income (loss). Subtract line 3b from line 3a			3c	
	4 Interest income	STATEMENT 4		4	
	5 Dividends: a Ordinary dividends			5a	
	b Qualified dividends	5b			
	6 Royalties			6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))			7	
8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))			8a		
b Collectibles (28%) gain (loss)	8b				
c Unrecaptured section 1250 gain (attach statement)	8c				
9 Net section 1231 gain (loss) (attach Form 4797)			9		
10 Other income (loss) (see instructions) Type <span style="border-bottom: 1px solid black; display: inline-block; width: 50px;"></span>			10		

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Form 1120S (2011)

Form 1120S (2011)

COLLINS HOME DELIVERY, INC.

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Shareholders' Pro Rata Share Items (continued)		Total amount	
Deductions	11 Section 179 deduction (attach Form 4562)	11	
	12a Contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type		
	(2) Amount	12c(2)	
	d Other deductions (see instructions) Type	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type	13d	
	e Other rental credits (see instructions) Type	13e	
	f Alcohol and cellulosic biofuel fuels credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type	13g	
	Foreign Transactions	14a Name of country or U.S. possession	
b Gross income from all sources		14b	
c Gross income sourced at shareholder level		14c	
Foreign gross income sourced at corporate level			
d Passive category		14d	
e General category		14e	
f Other (attach statement)		14f	
Deductions allocated and apportioned at shareholder level			
g Interest expense		14g	
h Other		14h	
Deductions allocated and apportioned at corporate level to foreign source income			
i Passive category		14i	
j General category		14j	
k Other (attach statement)		14k	
Other information			
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l		
m Reduction in taxes available for credit (attach statement)	14m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	

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Form 1120S (2011)

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Form 1120S (2011)

COLLINS HOME DELIVERY, INC.

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Page 4

Schedule L		Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)		
1	Cash						
2 a	Trade notes and accounts receivable						
b	Less allowance for bad debts						
3	Inventories						
4	U.S. government obligations						
5	Tax-exempt securities						
6	Other current assets (att. stmt.)						
7	Loans to shareholders						
8	Mortgage and real estate loans						
9	Other investments (att. stmt.)						
10 a	Buildings and other depreciable assets						
b	Less accumulated depreciation						
11 a	Depletable assets						
b	Less accumulated depletion						
12	Land (net of any amortization)						
13 a	Intangible assets (amortizable only)						
b	Less accumulated amortization						
14	Other assets (att. stmt.)						
15	Total assets						
Liabilities and Shareholders' Equity							
16	Accounts payable						
17	Mortgages, notes, bonds payable in less than 1 year						
18	Other current liabilities (att. stmt.)						
19	Loans from shareholders						
20	Mortgages, notes, bonds payable in 1 year or more						
21	Other liabilities (att. stmt.)						
22	Capital stock						
23	Additional paid-in capital						
24	Retained earnings						
25	Adjustments to shareholders' equity (att. stmt.)						
26	Less cost of treasury stock						
27	Total liabilities and shareholders' equity						

STATEMENT 9

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more - see instructions

1	Net income (loss) per books		5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a	Tax-exempt interest \$	
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize):	
a	Depreciation \$		a	Depreciation \$	
b	Travel and entertainment \$		7	Add lines 5 and 6	
4	Add lines 1 through 3		8	Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax year		
2	Ordinary income from page 1, line 21		
3	Other additions		
4	Loss from page 1, line 21		
5	Other reductions		
6	Combine lines 1 through 5		
7	Distributions other than dividend distributions		
8	Balance at end of tax year. Subtract line 7 from line 6		

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Form 1120S (2011)

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FORM 1120S	COMPENSATION OF OFFICERS	STATEMENT	1
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NAME OF OFFICER	SOCIAL SECURITY NUMBER	TIME DEVOTED TO BUSINESS	PCT OF STOCK	AMOUNT OF COMPENSATION
MICHAEL COLLINS	***-**-****	100	100.00%	
TOTAL COMPENSATION OF OFFICERS				
LESS: COMPENSATION CLAIMED ELSEWHERE				
EMPLOYMENT CREDIT REDUCTION				
TOTAL TO FORM 1120S, PAGE 1, LINE 7				

FORM 1120S	TAXES AND LICENSES	STATEMENT	2
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DESCRIPTION	AMOUNT
PAYROLL TAXES	
TOTAL TO FORM 1120S, PAGE 1, LINE 12	

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	3
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DESCRIPTION	AMOUNT
ADMINISTRATIVE FEE	
BANK FEES	
COMPLIANCE FEES	
COMPUTER EXPENSES	
CONTRACT LABOR	
DAMAGE CLAIMS	
INSURANCE	
MEALS AND ENTERTAINMENT	
OFFICE EXPENSES	
PAYROLL PROCESSING FEES	
SMALL TOOLS	
TELEPHONE	
TRUCK FUEL	
TRUCK RENTALS	
UNIFORMS	
WORKERS COMPENSATION	
TOTAL TO FORM 1120S, PAGE 1, LINE 19	



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SCHEDULE K	INTEREST INCOME	STATEMENT	4
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## DESCRIPTION

## AMOUNT

RBS CITIZENS

TOTAL TO SCHEDULE K, LINE 4

SCHEDULE K	OTHER DEDUCTIONS	STATEMENT	5
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## DESCRIPTION

## AMOUNT

MEDICAL INSURANCE PREMIUMS FOR MORE THAN 2% SHAREHOLDERS

TOTAL TO SCHEDULE K, LINE 12D

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	6
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## DESCRIPTION

## AMOUNT

EXCLUDED MEALS AND ENTERTAINMENT EXPENSES

TOTAL TO SCHEDULE K, LINE 16C

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT - OTHER ADDITIONS	STATEMENT	7
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## DESCRIPTION

## AMOUNT

PORTFOLIO INTEREST INCOME

TOTAL TO SCHEDULE M-2, LINE 3 - COLUMN (A)

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SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	8
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## DESCRIPTION

## AMOUNT

SECTION 179 EXPENSE DEDUCTION

OTHER DEDUCTIONS

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	9
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## DESCRIPTION

## AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

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SCHEDULE K-1 OTHER DEDUCTIONS, BOX 12, CODE S

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
MEDICAL INSURANCE PREMIUMS FOR MORE THAN 2% SHAREHOLDERS		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

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SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 16, CODE C

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

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Form <b>1120S</b>	<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Information about Form 1120S and its separate instructions is at <a href="http://www.irs.gov/form1120s">www.irs.gov/form1120s</a> .		OMB No. 1545-0130
2012			
Department of the Treasury Internal Revenue Service			
For calendar year 2012 or tax year beginning _____, and ending _____			
A S election effective date <b>03/23/2011</b>	<b>TYPE OR PRINT</b>	Name <b>COLLINS HOME DELIVERY, INC.</b>	D Employer identification number <b>[REDACTED]</b>
B Business activity code number (see instructions) <b>492210</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b>	E Date incorporated <b>03/23/2011</b>
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state, and ZIP code <b>ROCHESTER, NY 14612</b>	F Total assets (see instructions) \$ <b>[REDACTED]</b>
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed			
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation			
I Enter the number of shareholders who were shareholders during any part of the tax year <span style="float: right;">▶ <b>1</b></span>			
<b>Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.</b>			
<b>Income</b>	1 a Gross receipts or sales <b>[REDACTED]</b>	b Return and allowances <b>[REDACTED]</b>	c Bal. Subtract line 1b from line 1a <b>[REDACTED]</b>
	2 Cost of goods sold (attach Form 1125-A)		2
	3 Gross profit. Subtract line 2 from line 1c		3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)		4
	5 Other income (loss) (attach statement)		5
	6 <b>Total income (loss).</b> Add lines 3 through 5		6
<b>Deductions (See instructions for limitations)</b>	7 Compensation of officers <b>STATEMENT 1</b>		7
	8 Salaries and wages (less employment credits)		8
	9 Repairs and maintenance		9
	10 Bad debts		10
	11 Rents		11
	12 Taxes and licenses <b>STATEMENT 2</b>		12
	13 Interest		13
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		14
	15 Depletion (Do not deduct oil and gas depletion.)		15
	16 Advertising		16
	17 Pension, profit-sharing, etc., plans		17
18 Employee benefit programs		18	
19 Other deductions (attach statement) <b>STATEMENT 3</b>		19	
20 <b>Total deductions.</b> Add lines 7 through 19		20	
21 <b>Ordinary business income (loss).</b> Subtract line 20 from line 6		21	
<b>Tax and Payments</b>	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a	
	b Tax from Schedule D (Form 1120S)	22b	
	c Add lines 22a and 22b	22c	
	23 a 2012 estimated tax payments and 2011 overpayment credited to 2012	23a	
	b Tax deposited with Form 7004	23b	
	c Credit for federal tax paid on fuels (attach Form 4136)	23c	
	d Add lines 23a through 23c	23d	
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	24	
	25 <b>Amount owed.</b> If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25	
	26 <b>Overpayment.</b> If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26	
27 Enter amount from line 26 <b>Credited to 2013 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	27		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
<b>Sign Here</b>	Signature of officer <b>PRESIDENT</b> Date _____ Title _____		May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/type preparer's name <b>RICK J. BUCCI, CPA</b>	Preparer's signature <b>RICK J. BUCCI, CPA</b>	Date <b>02/09/21</b>
	Firm's name <b>RICK J. BUCCI, CPA</b>	Firm's EIN <b>** - ***9913</b>	PTIN <b>P00187264</b>
	Firm's address <b>2527 BAIRD ROAD PENFIELD, NY 14526</b>	Phone no. <b>585-230-5239</b>	



Form 1120S (2012) **COLLINS HOME DELIVERY, INC.** Page 2

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) _____						
2 See the instructions and enter the: (a) Business activity <b>DELIVERY SERVICES</b> (b) Product or service <b>DELIVERY</b>						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person?						X
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Voting Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own directly or indirectly an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock _____						
(ii) Total shares of non-restricted stock _____						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year _____						
(ii) Total shares of stock outstanding if all instruments were executed _____						
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide info. on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years _____ \$ _____						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year _____ \$ _____						
10 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000 b The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1						X
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction _____ \$ _____						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13a Did the corporation make any payments in 2012 that would require it to file Form(s) 1099 (see instructions)?					X	
b If "Yes," did the corporation file or will it file all required Forms 1099?					X	

Form 1120S (2012)

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2012.05080 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2012)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶	12c(2)	
	(2) Amount ▶	12d	
Credits	d Other deductions (see instructions) Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Alcohol and cellulosic biofuel fuels credit (attach Form 6478)	13f	
Foreign Transactions	g Other credits (see instructions) Type ▶	13g	
	14a Name of country or U.S. possession ▶	14a	
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level	14d	
	d Passive category	14e	
	e General category	14f	
	f Other (attach statement)	14g	
	Deductions allocated and apportioned at shareholder level	14h	
	g Interest expense	14i	
	h Other	14j	
	Deductions allocated and apportioned at corporate level to foreign source income	14k	
	i Passive category	14l	
	j General category	14m	
k Other (attach statement)	14n		
Alternative Minimum Tax (AMT) Items	Other information	14n	
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14n	
	m Reduction in taxes available for credit (attach statement)	14n	
	n Other foreign tax information (attach statement)	14n	
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
Items Affecting Shareholder Basis	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

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COLLINS HOME DELIVERY, INC.

Page 4

<b>Schedule K</b>		Shareholders' Pro Rata Share Items (continued)	Total amount
Other Information	17a	Investment income	17a
	17b	Investment expenses	17b
	17c	Dividend distributions paid from accumulated earnings and profits	17c
		Other items and amounts (attach statement)	
Reconciliation	18	<b>Income/loss reconciliation.</b> Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i	

<b>Schedule L</b>		Beginning of tax year		End of tax year	
Balance Sheets per Books		(a)	(b)	(c)	(d)
<b>Assets</b>					
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings	STATEMENT 6			
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock	( )		( )	
27	Total liabilities and shareholders' equity				

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COLLINS HOME DELIVERY, INC.

Page 5

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more - see instructions

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14I (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(		
5 Other reductions: <b>STATEMENT 7</b>	(	(	
6 Combine lines 1 through 5			
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6			

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Form 1120S (2012)

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[REDACTED]

FORM 1120S	COMPENSATION OF OFFICERS	STATEMENT	1
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NAME OF OFFICER	SOCIAL SECURITY NUMBER	TIME DEVOTED TO BUSINESS	PCT OF STOCK	AMOUNT OF COMPENSATION
MICHAEL COLLINS	[REDACTED]	100	100.00%	[REDACTED].
TOTAL COMPENSATION OF OFFICERS				[REDACTED].
LESS: COMPENSATION CLAIMED ELSEWHERE				
EMPLOYMENT CREDIT REDUCTION				
TOTAL TO FORM 1120S, PAGE 1, LINE 7				[REDACTED].

FORM 1120S	TAXES AND LICENSES	STATEMENT	2
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DESCRIPTION	AMOUNT
PAYROLL TAXES	[REDACTED]
NEW YORK TAXES - BASED ON INCOME	
TOTAL TO FORM 1120S, PAGE 1, LINE 12	

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	3
------------	------------------	-----------	---

DESCRIPTION	AMOUNT
ADMINISTRATIVE FEE	[REDACTED]
BANK FEES	
COMPUTER EXPENSES	
CONTRACT LABOR	
DAMAGE CLAIMS	
INSURANCE	
LEGAL AND ACCOUNTING	
MEALS AND ENTERTAINMENT	
PAYROLL PROCESSING FEES	
SMALL TOOLS	
TELEPHONE	
TRAINING	
TRUCK FUEL	
TRUCK RENTALS	
UNIFORMS	
WORKERS COMPENSATION	
TOTAL TO FORM 1120S, PAGE 1, LINE 19	

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COLLINS HOME DELIVERY, INC.

SCHEDULE K	OTHER DEDUCTIONS	STATEMENT	4
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## DESCRIPTION

AMOUNT

MEDICAL INSURANCE PREMIUMS FOR MORE THAN 2% SHAREHOLDERS

TOTAL TO SCHEDULE K, LINE 12D

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	5
------------	------------------------	-----------	---

## DESCRIPTION

AMOUNT

EXCLUDED MEALS AND ENTERTAINMENT EXPENSES

TOTAL TO SCHEDULE K, LINE 16C

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	6
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## DESCRIPTION

AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	7
--------------	---	-----------	---

## DESCRIPTION

AMOUNT

OTHER DEDUCTIONS

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

671112

OMB No. 1545-0130

► See separate instructions.

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**CONFIDENTIAL**COLLINS HOME DELIVERY, INC. [REDACTED]


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SCHEDULE K-1                      OTHER DEDUCTIONS, BOX 12, CODE S

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
MEDICAL INSURANCE PREMIUMS FOR MORE THAN 2% SHAREHOLDERS	[REDACTED]	SEE SHAREHOLDERS INSTRUCTIONS
TOTAL	[REDACTED]	

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SCHEDULE K-1                      NONDEDUCTIBLE EXPENSES, BOX 16, CODE C

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	[REDACTED]	SEE SHAREHOLDERS INSTRUCTIONS
TOTAL	[REDACTED]	

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Form <b>1120S</b>	<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Information about Form 1120S and its separate instructions is at <a href="http://www.irs.gov/form1120s">www.irs.gov/form1120s</a> .	OMB No. 1545-0130  <b>2013</b>
Department of the Treasury Internal Revenue Service		
For calendar year 2013 or tax year beginning _____, and ending _____		
A S election effective date <b>03/23/2011</b>	Name <b>COLLINS HOME DELIVERY, INC.</b>	D Employer identification number <b>[REDACTED]</b>
B Business activity code number (see instructions) <b>492210</b>	Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b>	E Date incorporated <b>03/23/2011</b>
C Check if Sch. M-3 attached <input type="checkbox"/>	City or town, state or province, country, and ZIP or foreign postal code <b>ROCHESTER, NY 14612</b>	F Total assets (see instructions) <b>\$ [REDACTED]</b>
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed		
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation		
I Enter the number of shareholders who were shareholders during any part of the tax year <b>1</b>		
<b>Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.</b>		
Income	1 a Gross receipts or sales <b>[REDACTED]</b> b Return and allowances <b>[REDACTED]</b> c Bal. Subtract line 1b from line 1a	1c <b>[REDACTED]</b>
	2 Cost of goods sold (attach Form 1125-A)	2 <b>[REDACTED]</b>
	3 Gross profit. Subtract line 2 from line 1c	3 <b>[REDACTED]</b>
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4 <b>[REDACTED]</b>
	5 Other income (loss) (attach statement)	5 <b>[REDACTED]</b>
	6 Total income (loss). Add lines 3 through 5	6 <b>[REDACTED]</b>
Deductions (See instructions for limitations)	7 Compensation of officers (see instructions - attach Form 1125-E)	7 <b>[REDACTED]</b>
	8 Salaries and wages (less employment credits)	8 <b>[REDACTED]</b>
	9 Repairs and maintenance	9 <b>[REDACTED]</b>
	10 Bad debts	10 <b>[REDACTED]</b>
	11 Rents	11 <b>[REDACTED]</b>
	12 Taxes and licenses <b>STATEMENT 1</b>	12 <b>[REDACTED]</b>
	13 Interest	13 <b>[REDACTED]</b>
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14 <b>[REDACTED]</b>
	15 Depletion (Do not deduct oil and gas depletion.)	15 <b>[REDACTED]</b>
	16 Advertising	16 <b>[REDACTED]</b>
	17 Pension, profit-sharing, etc., plans	17 <b>[REDACTED]</b>
Tax and Payments	18 Employee benefit programs	18 <b>[REDACTED]</b>
	19 Other deductions (attach statement) <b>STATEMENT 2</b>	19 <b>[REDACTED]</b>
	20 Total deductions. Add lines 7 through 19	20 <b>[REDACTED]</b>
	21 Ordinary business income (loss). Subtract line 20 from line 6	21 <b>[REDACTED]</b>
	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a <b>[REDACTED]</b>
	b Tax from Schedule D (Form 1120S)	22b <b>[REDACTED]</b>
	c Add lines 22a and 22b	22c <b>[REDACTED]</b>
	23 a 2013 estimated tax payments and 2012 overpayment credited to 2013	23a <b>[REDACTED]</b>
	b Tax deposited with Form 7004	23b <b>[REDACTED]</b>
	c Credit for federal tax paid on fuels (attach Form 4136)	23c <b>[REDACTED]</b>
d Add lines 23a through 23c	23d <b>[REDACTED]</b>	
24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	24 <b>[REDACTED]</b>	
25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed	25 <b>[REDACTED]</b>	
26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid	26 <b>[REDACTED]</b>	
27 Enter amount from line 26 Credited to 2014 estimated tax <b>[REDACTED]</b> Refunded <b>[REDACTED]</b>	27 <b>[REDACTED]</b>	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
	Signature of officer <b>[REDACTED]</b> Date _____ Title <b>PRESIDENT</b>	
Paid Preparer Use Only	Print/type preparer's name <b>RICK J. BUCCI, CPA</b>	Preparer's signature <b>RICK J. BUCCI, CPA</b>
	Firm's name <b>RICK J. BUCCI, CPA</b>	Check if self-employed <input checked="" type="checkbox"/> PTIN <b>P00187264</b>
	Firm's address <b>2527 BAIRD ROAD</b>	Firm's EIN <b>** - ***9913</b>
	<b>PENFIELD, NY 14526</b>	Phone no. <b>585-230-5239</b>
JWA For Paperwork Reduction Act Notice, see separate instructions. Form <b>1120S</b> (2013)		

Form 1120S (2013) **COLLINS HOME DELIVERY, INC.** Page 2

<b>Schedule B Other Information</b> (see instructions)					Yes	No
<b>1</b> Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="float: right;">▶</span>						
<b>2</b> See the instructions and enter the: (a) Business activity ▶ <b>DELIVERY SERVICES</b> (b) Product or service ▶ <b>DELIVERY</b>						
<b>3</b> At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation					X	
<b>4</b> At the end of the tax year, did the corporation:						
<b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.					X	
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Voting Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
<b>b</b> Own directly an interest of 20% or more, or own directly or indirectly an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.					X	
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
<b>5a</b> At the end of the tax year, did the corporation have any outstanding shares of restricted stock?					X	
If "yes" complete lines (i) and (ii) below						
(i) Total shares of restricted stock ▶						
(ii) Total shares of non-restricted stock ▶						
<b>b</b> At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?					X	
If "yes" complete lines (i) and (ii) below						
(i) Total shares of stock outstanding at the end of the tax year ▶						
(ii) Total shares of stock outstanding if all instruments were executed ▶						
<b>6</b> Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction?					X	
<b>7</b> Check this box if the corporation issued publicly offered debt instruments with original issue discount <span style="float: right;">▶ <input type="checkbox"/></span>						
If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.						
<b>8</b> If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years ▶ \$						
<b>9</b> Enter the accumulated earnings and profits of the corporation at the end of the tax year ▶ \$						
<b>10</b> Does the corporation satisfy <b>both</b> of the following conditions?						
<b>a</b> The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
<b>b</b> The corporation's total assets at the end of the tax year were less than \$250,000					X	
If "Yes," the corporation is not required to complete Schedules L and M-1						
<b>11</b> During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X	
If "Yes," enter the amount of principal reduction \$						
<b>12</b> During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions					X	
<b>13a</b> Did the corporation make any payments in 2013 that would require it to file Form(s) 1099 (see instructions)?					X	
<b>b</b> If "Yes," did the corporation file or will it file all required Forms 1099?						

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Form 1120S (2013)



Form 1120S (2013)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
Deductions	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
Credits	c Section 59(e)(2) expenditures (1) Type ▶	12c(2)	
	(2) Amount ▶	12d	
	d Other deductions (see instructions) Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
e Other rental credits (see instructions) Type ▶	13e		
Foreign Transactions	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
	14a Name of country or U.S. possession ▶	14b	
	b Gross income from all sources	14c	
	c Gross income sourced at shareholder level	14d	
	Foreign gross income sourced at corporate level	14e	
	d Passive category	14f	
	e General category	14g	
	f Other (attach statement)	14h	
	Deductions allocated and apportioned at shareholder level	14i	
	g Interest expense	14j	
	h Other	14k	
	Deductions allocated and apportioned at corporate level to foreign source income	14l	
Alternative Minimum Tax (AMT) Items	i Passive category	14m	
	j General category	14n	
	k Other (attach statement)	14o	
	Other information	14p	
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14q	
	m Reduction in taxes available for credit (attach statement)	14r	
Items Affecting Shareholder Basis	n Other foreign tax information (attach statement)	14s	
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
STATEMENT 3	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

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Form 1120S (2013)

COLLINS HOME DELIVERY, INC.

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<b>Schedule K</b> Shareholders' Pro Rata Share Items (continued)		Total amount
Other Information	17a Investment income	17a
	b Investment expenses	17b
	c Dividend distributions paid from accumulated earnings and profits	17c
	d Other items and amounts (attach statement)	
Reconciliation	18 <b>Income/loss reconciliation.</b> Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i	18

<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2 a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10 a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11 a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13 a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity				

STATEMENT 4

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COLLINS HOME DELIVERY, INC.

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**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more - see instructions

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14I (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(		
5 Other reductions: <b>STATEMENT 5</b>	(	(	
6 Combine lines 1 through 5			
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6			

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[REDACTED]

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
PAYROLL TAXES/BENEFITS	[REDACTED].
NEW YORK TAXES - BASED ON INCOME	[REDACTED].
TOTAL TO FORM 1120S, PAGE 1, LINE 12	[REDACTED].

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
ADMINISTRATIVE FEE	[REDACTED]
BANK FEES	[REDACTED]
COMPUTER EXPENSES	[REDACTED]
CONTRACT LABOR	[REDACTED]
DAMAGE CLAIMS	[REDACTED]
INSURANCE	[REDACTED]
LEGAL AND ACCOUNTING	[REDACTED]
MEALS AND ENTERTAINMENT	[REDACTED]
PAYROLL PROCESSING FEES	[REDACTED]
SMALL TOOLS	[REDACTED]
TELEPHONE	[REDACTED]
TRAVEL	[REDACTED]
TRUCK FUEL	[REDACTED]
TRUCK RENTALS	[REDACTED]
UNIFORMS	[REDACTED]
WORKERS COMPENSATION	[REDACTED]
TOTAL TO FORM 1120S, PAGE 1, LINE 19	[REDACTED]

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	3
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DESCRIPTION	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	[REDACTED].
TOTAL TO SCHEDULE K, LINE 16C	[REDACTED].

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COLLINS HOME DELIVERY, INC.

[REDACTED]

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	4
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## DESCRIPTION

## AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	5
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## DESCRIPTION

## AMOUNT

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

671113

OMB No. 1545-0130

► See separate instructions.

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SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 16, CODE C

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		



Form <b>1120S</b>		<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Information about Form 1120S and its separate instructions is at <a href="http://www.irs.gov/form1120s">www.irs.gov/form1120s</a> .		OMB No. 1545-0123  <b>2014</b>	
Department of the Treasury Internal Revenue Service					
For calendar year 2014 or tax year beginning _____, and ending _____					
A S election effective date <b>03/23/2011</b>		B Business activity code number (see instructions) <b>492210</b>		D Employer identification number [REDACTED]	
C Check if Sch. M-3 attached <input type="checkbox"/>		Name <b>COLLINS HOME DELIVERY, INC.</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b> City or town, state or province, country, and ZIP or foreign postal code <b>ROCHESTER, NY 14612</b>		E Date incorporated <b>03/23/2011</b> F Total assets (see instructions) \$ [REDACTED]	
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed					
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation					
I Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">▶ 1</span>					
<b>Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.</b>					
Income	1 a Gross receipts or sales	b Return and allowances	c Bal. Subtract line 1b from line 1a	1c	
	2 Cost of goods sold (attach Form 1125-A)			2	
	3 Gross profit. Subtract line 2 from line 1c			3	
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4	
	5 Other income (loss) (attach statement)			5	
	6 Total income (loss). Add lines 3 through 5			6	
Deductions (See instructions for limitations)	7 Compensation of officers (see instrs. - attach Form 1125-E)			7	
	8 Salaries and wages (less employment credits)			8	
	9 Repairs and maintenance			9	
	10 Bad debts			10	
	11 Rents			11	
	12 Taxes and licenses	STATEMENT 1		12	
	13 Interest			13	
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14	
	15 Depletion (Do not deduct oil and gas depletion.)			15	
	16 Advertising			16	
	17 Pension, profit-sharing, etc., plans			17	
	18 Employee benefit programs			18	
	19 Other deductions (attach statement)	STATEMENT 2		19	
	20 Total deductions. Add lines 7 through 19			20	
	21 Ordinary business income (loss). Subtract line 20 from line 6			21	
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a			
	b Tax from Schedule D (Form 1120S)	22b			
	c Add lines 22a and 22b			22c	
	23 a 2014 estimated tax payments and 2013 overpayment credited to 2014	23a			
	b Tax deposited with Form 7004	23b			
	c Credit for federal tax paid on fuels (attach Form 4136)	23c			
	d Add lines 23a through 23c			23d	
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached			24	
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed			25	
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid			26	
27 Enter amount from line 26 Credited to 2015 estimated tax		Refunded	27		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
Sign Here		Signature of officer		Date	
		PRESIDENT		Title	
May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Paid Preparer Use Only	Print/type preparer's name		Preparer's signature		Date
	RICK J. BUCCI, CPA		RICK J. BUCCI, CPA		02/09/21
	Firm's name ▶ RICK J. BUCCI, CPA		Check if self-employed <input checked="" type="checkbox"/>		PTIN P00187264
	Firm's address ▶ 2527 BAIRD ROAD PENFIELD, NY 14526		Firm's EIN ▶ **-***9913		Phone no. 585-230-5239
JWA 411701 12-22-14 For Paperwork Reduction Act Notice, see separate instructions. Form 1120S (2014)					

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2014.06020 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2014) **COLLINS HOME DELIVERY, INC.** Page 2

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="float: right;">▶</span>						
2 See the instructions and enter the:						
(a) Business activity <b>▶ DELIVERY SERVICES</b> (b) Product or service <b>▶ DELIVERY</b>						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Voting Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own directly or indirectly an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock <span style="float: right;">▶</span>						
(ii) Total shares of non-restricted stock <span style="float: right;">▶</span>						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year <span style="float: right;">▶</span>						
(ii) Total shares of stock outstanding if all instruments were executed <span style="float: right;">▶</span>						
6 Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <span style="float: right;">▶</span> <input type="checkbox"/>						
If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years <span style="float: right;">▶</span> \$						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year <span style="float: right;">▶</span> \$						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000						X
If "Yes," the corporation is not required to complete Schedules L and M-1						
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction <span style="float: right;">▶</span> \$						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13a Did the corporation make any payments in 2014 that would require it to file Form(s) 1099 (see instructions)?					X	
b If "Yes," did the corporation file or will it file all required Forms 1099?					X	

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Form 1120S (2014)



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COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	3b Expenses from other rental activities (attach statement)	3b	
	3c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 (see instructions) Type	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type		
	(2) Amount	12c(2)	
Credits	d Other deductions (see instructions) Type	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type	13d	
	e Other rental credits (see instructions) Type	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
Foreign Transactions	g Other credits (see instructions) Type	13g	
	14a Name of country or U.S. possession		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14i	
	j General category	14j	
Alternative Minimum Tax (AMT) Items	k Other (attach statement)	14k	
	Other information		
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l	
	m Reduction in taxes available for credit (attach statement)	14m	
	n Other foreign tax information (attach statement)		
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
Items Affecting Shareholder Basis	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
STATEMENT 3	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

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Form 1120S (2014)

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2014.06020 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2014)		COLLINS HOME DELIVERY, INC.		Page 4	
<b>Schedule K</b> Shareholders' Pro Rata Share Items (continued)			Total amount		
Other Information	17a Investment income	17a			
	b Investment expenses	17b			
	c Dividend distributions paid from accumulated earnings and profits	17c			
	d Other items and amounts (attach statement)				
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i			18	
<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity				
		STATEMENT 4			

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COLLINS HOME DELIVERY, INC.

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**Schedule M-1****Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2****Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(		
5 Other reductions <b>STATEMENT 5</b>	(	(	
6 Combine lines 1 through 5			
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6			

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Form 1120S (2014)

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2014.06020 COLLINS HOME DELIVERY, INC. 45105681

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COLLINS HOME DELIVERY, INC.

[REDACTED]

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
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PAYROLL TAXES/BENEFITS	[REDACTED]
NEW YORK TAXES - BASED ON INCOME	[REDACTED]

TOTAL TO FORM 1120S, PAGE 1, LINE 12	[REDACTED]
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FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
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ADMINISTRATIVE FEE	[REDACTED]
BANK FEES	[REDACTED]
CONTRACT LABOR	[REDACTED]
DAMAGE CLAIMS	[REDACTED]
INSURANCE	[REDACTED]
INTERNET	[REDACTED]
LEGAL AND ACCOUNTING	[REDACTED]
MEALS AND ENTERTAINMENT	[REDACTED]
MISCELLANEOUS	[REDACTED]
PAYROLL PROCESSING FEES	[REDACTED]
SMALL TOOLS	[REDACTED]
TELEPHONE	[REDACTED]
TRAVEL	[REDACTED]
TRUCK FUEL	[REDACTED]
TRUCK RENTALS	[REDACTED]
UNIFORMS	[REDACTED]

TOTAL TO FORM 1120S, PAGE 1, LINE 19	[REDACTED]
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SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	3
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DESCRIPTION	AMOUNT
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EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	[REDACTED]
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TOTAL TO SCHEDULE K, LINE 16C	[REDACTED]
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COLLINS HOME DELIVERY, INC.

[REDACTED]

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	4
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## DESCRIPTION

## AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	5
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## DESCRIPTION

## AMOUNT

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

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Schedule K-1  
(Form 1120S)Department of the Treasury  
Internal Revenue ServiceFor calendar year 2014, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_

2014

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Shareholder's Share of Income, Deductions,  
Credits, etc. ▶ See separate instructions.

Part I Information About the Corporation			
A Corporation's employer identification number	██████████		
B Corporation's name, address, city, state, and ZIP code	COLLINS HOME DELIVERY, INC. 163 ARCADIA PARKWAY ROCHESTER, NY 14612		
C IRS Center where corporation filed return	E-FILE		
Part II Information About the Shareholder			
D Shareholder's identifying number	██████████		
E Shareholder's name, address, city, state and ZIP code	MICHAEL J. COLLINS ██████████		
F Shareholder's percentage of stock ownership for tax year	100.000000%		
For IRS Use Only			
		Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items	
		1 Ordinary business income (loss)	13 Credits
		2 Net rental real estate inc (loss)	
		3 Other net rental income (loss)	
		4 Interest income	
		5a Ordinary dividends	
		5b Qualified dividends	14 Foreign transactions
		6 Royalties	
		7 Net short-term capital gain (loss)	
		8a Net long-term capital gain (loss)	
		8b Collectibles (28%) gain (loss)	
		8c Unrecaptured sec 1250 gain	
		9 Net section 1231 gain (loss)	
		10 Other income (loss)	15 Alternative min tax (AMT) items
11 Section 179 deduction	16 Items affecting shareholder basis		
12 Other deductions			
17 Other information			

\*See attached statement for additional information.

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JWA For Paperwork Reduction Act Notice, see Instructions for Form 1120S.

IRS.gov/form1120s

Schedule K-1 (Form 1120S) 2014

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2014.06020 COLLINS HOME DELIVERY, INC. 45105681

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COLLINS HOME DELIVERY, INC.





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**SCHEDULE K-1** **NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

**CONFIDENTIAL****MCOLLINS000037**



<b>Form 1120S</b>		<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Information about Form 1120S and its separate instructions is at <a href="http://www.irs.gov/form1120s">www.irs.gov/form1120s</a> .		OMB No. 1545-0123  <b>2015</b>				
Department of the Treasury Internal Revenue Service								
For calendar year 2015 or tax year beginning _____, and ending _____								
A S election effective date <b>03/23/2011</b>		B Business activity code number (see instructions) <b>492210</b>		D Employer identification number [REDACTED]				
C Check if Sch. M-3 attached <input type="checkbox"/>		Name <b>COLLINS HOME DELIVERY, INC.</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b> City or town, state or province, country, and ZIP or foreign postal code <b>ROCHESTER, NY 14612</b>		E Date incorporated <b>03/23/2011</b>				
F Total assets (see instructions) \$ [REDACTED]								
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed								
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation								
I Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">▶ 1</span>								
Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.								
Income	1 a	Gross receipts or sales	b	Return and allowances	c	Subtract line 1b from line 1a	1c	
	2	Cost of goods sold (attach Form 1125-A)					2	
	3	Gross profit. Subtract line 2 from line 1c					3	
	4	Net gain (loss) from Form 4797, line 17 (attach Form 4797)					4	
	5	Other income (loss) (attach statement)					5	
	6	Total income (loss). Add lines 3 through 5					6	
Deductions (See instructions for limitations)	7	Compensation of officers (see instrs. - attach Form 1125-E)					7	
	8	Salaries and wages (less employment credits)					8	
	9	Repairs and maintenance					9	
	10	Bad debts					10	
	11	Rents					11	
	12	Taxes and licenses			STATEMENT 1		12	
	13	Interest					13	
	14	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)					14	
	15	Depletion (Do not deduct oil and gas depletion.)					15	
	16	Advertising					16	
	17	Pension, profit-sharing, etc., plans					17	
	18	Employee benefit programs					18	
	19	Other deductions (attach statement)			STATEMENT 2		19	
	20	Total deductions. Add lines 7 through 19					20	
	21	Ordinary business income (loss). Subtract line 20 from line 6					21	
Tax and Payments	22 a	Excess net passive income or LIFO recapture tax (see instructions)	22a					
	b	Tax from Schedule D (Form 1120S)	22b					
	c	Add lines 22a and 22b					22c	
	23 a	2015 estimated tax payments and 2014 overpayment credited to 2015	23a					
	b	Tax deposited with Form 7004	23b					
	c	Credit for federal tax paid on fuels (attach Form 4136)	23c					
	d	Add lines 23a through 23c					23d	
	24	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>					24	
	25	Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed					25	
	26	Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid					26	
27	Enter amount from line 26 Credited to 2016 estimated tax			Refunded		27		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
Sign Here	Signature of officer		Date		Title		PRESIDENT	
	[Signature]		[Date]		[Title]		[Signature]	
Paid Preparer Use Only	Print/type preparer's name		Preparer's signature		Date		PTIN	
	RICK J. BUCCI, CPA		RICK J. BUCCI, CPA		02/09/21		P00187264	
	Firm's name ▶ RICK J. BUCCI, CPA		Firm's EIN ▶ **-***9913		Phone no.		585-230-5239	
	Firm's address ▶ 2527 BAIRD ROAD PENFIELD, NY 14526							
JWA 511701 12-23-15 For Paperwork Reduction Act Notice, see separate instructions. Form 1120S (2015)								

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2015.06000 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2015) **COLLINS HOME DELIVERY, INC.** Page 2

**Schedule B Other Information** (see instructions)

	Yes	No		
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <input type="checkbox"/>				
2 See the instructions and enter the:				
(a) Business activity <b>DELIVERY SERVICES</b> (b) Product or service <b>DELIVERY</b>				
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X		
4 At the end of the tax year, did the corporation:				
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X		
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below				X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below				X
(i) Total shares of restricted stock				
(ii) Total shares of non-restricted stock				
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below				X
(i) Total shares of stock outstanding at the end of the tax year				
(ii) Total shares of stock outstanding if all instruments were executed				
6 Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction?				X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.				
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years				
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year				
10 Does the corporation satisfy both of the following conditions?				
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000				
b The corporation's total assets at the end of the tax year were less than \$250,000				X
If "Yes," the corporation is not required to complete Schedules L and M-1				
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction				X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions				X
13a Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?	X			
b If "Yes," did the corporation file or will it file all required Forms 1099?	X			

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Form 1120S (2015)



Form 1120S (2015)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	3b Expenses from other rental activities (attach statement)	3b	
	3c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 (see instructions) Type	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type	12c(2)	
	(2) Amount	12d	
Credits	d Other deductions (see instructions) Type		
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type	13d	
	e Other rental credits (see instructions) Type	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
Foreign Transactions	g Other credits (see instructions) Type	13g	
	14a Name of country or U.S. possession		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14i	
	j General category	14j	
Alternative Minimum Tax (AMT) Items	k Other (attach statement)	14k	
	Other information		
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l	
	m Reduction in taxes available for credit (attach statement)	14m	
	n Other foreign tax information (attach statement)		
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
Items Affecting Shareholder Basis	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
STATEMENT 3	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

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Form 1120S (2015)

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2015.06000 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2015)

COLLINS HOME DELIVERY, INC.

Page 4

<b>Schedule K</b> Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i	18	

<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity				

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Form 1120S (2015)

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2015.06000 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2015) COLLINS HOME DELIVERY, INC. Page 5

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

<p><b>1</b> Net income (loss) per books</p> <p><b>2</b> Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):</p> <p><b>3</b> Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize):</p> <p style="margin-left: 20px;"><b>a</b> Depreciation \$</p> <p style="margin-left: 20px;"><b>b</b> Travel and entertainment \$</p> <p><b>4</b> Add lines 1 through 3</p>	<p><b>5</b> Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):</p> <p style="margin-left: 20px;"><b>a</b> Tax-exempt interest \$</p> <p><b>6</b> Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize):</p> <p style="margin-left: 20px;"><b>a</b> Depreciation \$</p> <p><b>7</b> Add lines 5 and 6</p> <p><b>8</b> Income (loss) (Schedule K, line 18). Line 4 less line 7</p>
--	---

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
<b>1</b> Balance at beginning of tax year			
<b>2</b> Ordinary income from page 1, line 21			
<b>3</b> Other additions			
<b>4</b> Loss from page 1, line 21	(		
<b>5</b> Other reductions <b>STATEMENT 5</b>	(	(	
<b>6</b> Combine lines 1 through 5			
<b>7</b> Distributions other than dividend distributions			
<b>8</b> Balance at end of tax year. Subtract line 7 from line 6			

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Form 1120S (2015)

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COLLINS HOME DELIVERY, INC.

[REDACTED]

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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## DESCRIPTION

## AMOUNT

PAYROLL TAXES/BENEFITS

TOTAL TO FORM 1120S, PAGE 1, LINE 12

[REDACTED]

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
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## DESCRIPTION

## AMOUNT

ADMINISTRATIVE FEE

BANK FEES

CONTRACT LABOR

DAMAGE CLAIMS

INSURANCE

INTERNET

LEGAL AND ACCOUNTING

MEALS AND ENTERTAINMENT

OFFICE

PAYROLL PROCESSING FEES

SMALL TOOLS

TELEPHONE

TRUCK FUEL

TRUCK RENTALS

UNIFORMS

TOTAL TO FORM 1120S, PAGE 1, LINE 19

[REDACTED]

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	3
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## DESCRIPTION

## AMOUNT

EXCLUDED MEALS AND ENTERTAINMENT EXPENSES

TOTAL TO SCHEDULE K, LINE 16C

[REDACTED]

CONFIDENTIAL

COLLINS HOME DELIVERY, INC.

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	4
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## DESCRIPTION

## AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	5
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## DESCRIPTION

## AMOUNT

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

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OMB No. 1545-0123

► See separate instructions.

\*See attached statement for additional information.

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COLLINS HOME DELIVERY, INC.





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**SCHEDULE K-1** **NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

**CONFIDENTIAL****MCOLLINS000046**

<b>Form 1120S</b>		<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Information about Form 1120S and its separate instructions is at <a href="http://www.irs.gov/form1120s">www.irs.gov/form1120s</a> .		OMB No. 1545-0123  <b>2016</b>				
Department of the Treasury Internal Revenue Service								
For calendar year 2016 or tax year beginning _____, and ending _____								
A S election effective date <b>03/23/2011</b>		B Business activity code number (see instructions) <b>492210</b>		D Employer identification number [REDACTED]				
C Check if Sch. M-3 attached <input type="checkbox"/>		Name <b>COLLINS HOME DELIVERY, INC.</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b> City or town, state or province, country, and ZIP or foreign postal code <b>ROCHESTER, NY 14612</b>		E Date incorporated <b>03/23/2011</b> F Total assets (see instructions) \$ [REDACTED]				
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed								
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation								
I Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">1</span>								
<b>Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.</b>								
Income	1 a	Gross receipts or sales	b	Return and allowances	c	Bal. Subtract line 1b from line 1a	1c	
	2	Cost of goods sold (attach Form 1125-A)					2	
	3	Gross profit. Subtract line 2 from line 1c					3	
	4	Net gain (loss) from Form 4797, line 17 (attach Form 4797)					4	
	5	Other income (loss) (attach statement)					5	
	6	Total income (loss). Add lines 3 through 5					6	
Deductions (See instructions for limitations)	7	Compensation of officers (see instrs. - attach Form 1125-E)					7	
	8	Salaries and wages (less employment credits)					8	
	9	Repairs and maintenance					9	
	10	Bad debts					10	
	11	Rents					11	
	12	Taxes and licenses			STATEMENT 1		12	
	13	Interest					13	
	14	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)					14	
	15	Depletion (Do not deduct oil and gas depletion.)					15	
	16	Advertising					16	
	17	Pension, profit sharing, etc., plans					17	
	18	Employee benefit programs					18	
	19	Other deductions (attach statement)			STATEMENT 2		19	
	20	Total deductions. Add lines 7 through 19					20	
	21	Ordinary business income (loss). Subtract line 20 from line 6					21	
Tax and Payments	22 a	Excess net passive income or LIFO recapture tax (see instructions)	22a					
	b	Tax from Schedule D (Form 1120S)	22b					
	c	Add lines 22a and 22b					22c	
	23 a	2016 estimated tax payments and 2015 overpayment credited to 2016	23a					
	b	Tax deposited with Form 7004	23b					
	c	Credit for federal tax paid on fuels (attach Form 4136)	23c					
	d	Add lines 23a through 23c					23d	
	24	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>					24	
	25	Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed					25	
	26	Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid					26	
27	Enter amount from line 26 Credited to 2017 estimated tax			Refunded		27		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Sign Here		Signature of officer		Date		Title		
		[Signature]				PRESIDENT		
Print/type preparer's name		Preparer's signature		Date		PTIN		
RICK J. BUCCI, CPA		RICK J. BUCCI, CPA		11/01/18		P00187264		
Firm's name		Firm's EIN		Phone no.				
RICK J. BUCCI, CPA		**-***9913		585-230-5239				
Firm's address		Firm's EIN		Phone no.				
491 WEST WHITNEY RD		P00187264		585-230-5239				
PENFIELD, NY 14526								
JWA 611701 12-22-16 For Paperwork Reduction Act Notice, see separate instructions.						Form 1120S (2016)		

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2016.06000 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2016) **COLLINS HOME DELIVERY, INC.** Page 2

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="float: right;">▶</span>						
2 See the instructions and enter the:						
(a) Business activity ▶ <b>DELIVERY SERVICES</b> (b) Product or service ▶ <b>DELIVERY</b>						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock <span style="float: right;">▶</span>						
(ii) Total shares of non-restricted stock <span style="float: right;">▶</span>						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year <span style="float: right;">▶</span>						
(ii) Total shares of stock outstanding if all instruments were executed <span style="float: right;">▶</span>						
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide info. on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <span style="float: right;">▶</span> <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years <span style="float: right;">▶</span> \$						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year <span style="float: right;">▶</span> \$						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000						X
If "Yes," the corporation is not required to complete Schedules L and M-1						
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction <span style="float: right;">▶</span> \$						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13a Did the corporation make any payments in 2016 that would require it to file Form(s) 1099?					X	
b If "Yes," did the corporation file or will it file all required Forms 1099?					X	

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Form 1120S (2016)



Form 1120S (2016)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	3b Expenses from other rental activities (attach statement)	3b	
	3c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶	12c(2)	
	(2) Amount ▶	12d	
Credits	d Other deductions (see instructions) Type ▶		
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14i	
	j General category	14j	
	k Other (attach statement)	14k	
Other information			
Alternative Minimum Tax (AMT) Items	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l	
	m Reduction in taxes available for credit (attach statement)	14m	
	n Other foreign tax information (attach statement)		
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
Items Affecting Shareholder Basis	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
d Distributions (attach statement if required)	16d		
e Repayment of loans from shareholders	16e		

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Form 1120S (2016)

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2016.06000 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2016)		COLLINS HOME DELIVERY, INC.		Page 4	
<b>Schedule K</b> Shareholders' Pro Rata Share Items (continued)			Total amount		
Other Information	17a Investment income	17a			
	b Investment expenses	17b			
	c Dividend distributions paid from accumulated earnings and profits	17c			
	d Other items and amounts (attach statement)				
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i			18	
<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity				
		STATEMENT 5			

JWA Form 1120S (2016)

Form 1120S (2016)

COLLINS HOME DELIVERY, INC.

Page 5

**Schedule M-1****Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2****Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(		
5 Other reductions <b>STATEMENT 6</b>	(	(	
6 Combine lines 1 through 5			
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6			

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Form 1120S (2016)

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COLLINS HOME DELIVERY, INC.

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
PAYROLL TAXES/BENEFITS	
NEW YORK TAXES - BASED ON INCOME	
TOTAL TO FORM 1120S, PAGE 1, LINE 12	

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
ADMINISTRATIVE FEE	
BANK FEES	
CONTRACT LABOR	
DAMAGE CLAIMS	
INSURANCE	
INTERNET	
LEGAL AND ACCOUNTING	
MEALS AND ENTERTAINMENT	
OFFICE	
PAYROLL PROCESSING FEES	
TELEPHONE	
TRUCK FUEL	
TRUCK RENTALS	
UNIFORMS	
TOTAL TO FORM 1120S, PAGE 1, LINE 19	

SCHEDULE K	CHARITABLE CONTRIBUTIONS	STATEMENT	3
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DESCRIPTION	NO LIMIT	50% / 100% LIMIT	30% LIMIT	20% LIMIT
MISCELLANEOUS				
TOTALS TO SCHEDULE K, LINE 12A				

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COLLINS HOME DELIVERY, INC.

[REDACTED]

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	4
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DESCRIPTION	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	[REDACTED]
TOTAL TO SCHEDULE K, LINE 16C	[REDACTED]

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	5
------------	---	-----------	---

DESCRIPTION	AMOUNT
BALANCE AT BEGINNING OF YEAR	[REDACTED]
NET INCOME PER BOOKS	[REDACTED]
DISTRIBUTIONS	[REDACTED]
OTHER INCREASES (DECREASES)	[REDACTED]
BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)	[REDACTED]

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	6
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DESCRIPTION	AMOUNT
CHARITABLE CONTRIBUTIONS	[REDACTED]
NONDEDUCTIBLE EXPENSES	[REDACTED]
TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)	[REDACTED]



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Schedule K-1  
(Form 1120S)Department of the Treasury  
Internal Revenue ServiceFor calendar year 2016, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_

2016

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Shareholder's Share of Income, Deductions,  
Credits, etc. ▶ See separate instructions.

## Part I Information About the Corporation

A Corporation's employer identification number

B Corporation's name, address, city, state, and ZIP code

COLLINS HOME DELIVERY, INC.  
163 ARCADIA PARKWAY  
ROCHESTER, NY 14612

C IRS Center where corporation filed return

E-FILE

## Part II Information About the Shareholder

D Shareholder's identifying number

E Shareholder's name, address, city, state and ZIP code

MICHAEL COLLINS

F Shareholder's percentage of stock  
ownership for tax year 100.000000%

For IRS Use Only

Part III Shareholder's Share of Current Year Income,  
Deductions, Credits, and Other Items

1	Ordinary business income (loss)	13	Credits
2	Net rental real estate inc (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured sec 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative min tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		C*	
12	Other deductions	D	
A			
		17	Other information

\*See attached statement for additional information.

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11-16-16

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IRS.gov/form1120s

Schedule K-1 (Form 1120S) 2016

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21171101 150828 2016.06000 COLLINS HOME DELIVERY, INC. 45105681

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COLLINS HOME DELIVERY, INC.





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**SCHEDULE K-1** **NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

**CONFIDENTIAL****MCOLLINS000055**

<b>Form 1120S</b>		<b>U.S. Income Tax Return for an S Corporation</b> ▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Go to <a href="http://www.irs.gov/Form1120S">www.irs.gov/Form1120S</a> for instructions and the latest information.		OMB No. 1545-0123  <b>2017</b>				
Department of the Treasury Internal Revenue Service								
For calendar year 2017 or tax year beginning _____, and ending _____								
A S election effective date <b>03/23/2011</b>		Name <b>COLLINS HOME DELIVERY, INC.</b>		D Employer identification number [REDACTED]				
B Business activity code number (see instructions) <b>492210</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>163 ARCADIA PARKWAY</b>		E Date incorporated <b>03/23/2011</b>				
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code <b>ROCHESTER, NY 14612</b>		F Total assets (see instructions) \$ [REDACTED]				
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed								
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input checked="" type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation								
I Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">▶ 1</span>								
<b>Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.</b>								
Income	1 a	Gross receipts or sales	b	Return and allowances	c	Subtract line 1b from line 1a	1c	
	2	Cost of goods sold (attach Form 1125-A)					2	
	3	Gross profit. Subtract line 2 from line 1c					3	
	4	Net gain (loss) from Form 4797, line 17 (attach Form 4797)					4	
	5	Other income (loss) (attach statement)					5	
	6	<b>Total income (loss).</b> Add lines 3 through 5					6	
Deductions (See instructions for limitations)	7	Compensation of officers (see instrs. - attach Form 1125-E)					7	
	8	Salaries and wages (less employment credits)					8	
	9	Repairs and maintenance					9	
	10	Bad debts					10	
	11	Rents					11	
	12	Taxes and licenses <b>STATEMENT 1</b>					12	
	13	Interest					13	
	14	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)					14	
	15	Depletion (Do not deduct oil and gas depletion.)					15	
	16	Advertising					16	
	17	Pension, profit-sharing, etc., plans					17	
	18	Employee benefit programs					18	
	19	Other deductions (attach statement) <b>STATEMENT 2</b>					19	
	20	<b>Total deductions.</b> Add lines 7 through 19					20	
	21	<b>Ordinary business income (loss).</b> Subtract line 20 from line 6					21	
Tax and Payments	22 a	Excess net passive income or LIFO recapture tax (see instructions)					22a	
	b	Tax from Schedule D (Form 1120S)					22b	
	c	Add lines 22a and 22b					22c	
	23 a	2017 estimated tax payments and 2016 overpayment credited to 2017					23a	
	b	Tax deposited with Form 7004					23b	
	c	Credit for federal tax paid on fuels (attach Form 4136)					23c	
	d	Add lines 23a through 23c					23d	
	24	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>					24	
	25	<b>Amount owed.</b> If line 23d is smaller than the total of lines 22c and 24, enter amount owed					25	
	26	<b>Overpayment.</b> If line 23d is larger than the total of lines 22c and 24, enter amount overpaid					26	
27	Enter amount from line 26 <b>Credited to 2018 estimated tax</b> ▶ <b>Refunded</b> ▶					27		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
<b>Sign Here</b>		Signature of officer _____ Date		Title <b>PRESIDENT</b>		May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Print/type preparer's name <b>RICK J. BUCCI, CPA</b>		Preparer's signature <b>RICK J. BUCCI, CPA</b>		Date <b>10/16/18</b>				
Paid Preparer Use Only	Firm's name ▶ <b>RICK J. BUCCI, CPA</b>			Check if self-employed <input checked="" type="checkbox"/>		PTIN <b>P00187264</b>		
	Firm's address ▶ <b>491 WEST WHITNEY RD PENFIELD, NY 14526</b>			Firm's EIN ▶ <b>**-***9913</b>		Phone no. <b>585-230-5239</b>		
JWA 711701 12-20-17 For Paperwork Reduction Act Notice, see separate instructions. Form <b>1120S</b> (2017)								

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2017.04030 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2017) **COLLINS HOME DELIVERY, INC.** Page 2

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="float: right;">▶</span>						
2 See the instructions and enter the:						
(a) Business activity <b>▶ DELIVERY SERVICES</b> (b) Product or service <b>▶ DELIVERY</b>						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock <span style="float: right;">▶</span>						
(ii) Total shares of non-restricted stock <span style="float: right;">▶</span>						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year <span style="float: right;">▶</span>						
(ii) Total shares of stock outstanding if all instruments were executed <span style="float: right;">▶</span>						
6 Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <span style="float: right;">▶</span> <input type="checkbox"/>						
If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years <span style="float: right;">▶</span> \$						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year <span style="float: right;">▶</span> \$						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000						X
If "Yes," the corporation is not required to complete Schedules L and M-1						
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction <span style="float: right;">▶</span> \$						X
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13a Did the corporation make any payments in 2017 that would require it to file Form(s) 1099?					X	
b If "Yes," did the corporation file or will it file all required Forms 1099?					X	

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Form 1120S (2017)



Form 1120S (2017)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	3b Expenses from other rental activities (attach statement)	3b	
	3c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 (see instructions) Type	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type	12c(2)	
	(2) Amount	12d	
Credits	d Other deductions (see instructions) Type		
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type	13d	
	e Other rental credits (see instructions) Type	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type	13g	
Foreign Transactions	14a Name of country or U.S. possession		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14i	
	j General category	14j	
	k Other (attach statement)	14k	
Other information			
Alternative Minimum Tax (AMT) Items	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l	
	m Reduction in taxes available for credit (attach statement)	14m	
	n Other foreign tax information (attach statement)		
	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
Items Affecting Shareholder Basis	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
c Nondeductible expenses		16c	
d Distributions (attach statement if required)		16d	
e Repayment of loans from shareholders		16e	

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Form 1120S (2017)

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2017.04030 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2017)		COLLINS HOME DELIVERY, INC.		Page 4	
<b>Schedule K</b> Shareholders' Pro Rata Share Items (continued)			Total amount		
Other Information	17a Investment income	17a			
	b Investment expenses	17b			
	c Dividend distributions paid from accumulated earnings and profits	17c			
	d Other items and amounts (att. stmt.)				
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14i			18	
<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (att. stmt.)				
15	Total assets				
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock				
27	Total liabilities and shareholders' equity				
JWA		Form 1120S (2017)			

Form 1120S (2017)

COLLINS HOME DELIVERY, INC.

Page 5

**Schedule M-1****Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2****Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	(		
5 Other reductions <b>STATEMENT 5</b>	(	(	
6 Combine lines 1 through 5			
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6			

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FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
-------------	--------

PAYROLL TAXES/BENEFITS	
NEW YORK TAXES - BASED ON INCOME	

TOTAL TO FORM 1120S, PAGE 1, LINE 12	
--------------------------------------	--

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
------------	------------------	-----------	---

DESCRIPTION	AMOUNT
-------------	--------

ADMINISTRATIVE FEE	
AUTO EXPENSES	
CONTRACT LABOR	
DAMAGE CLAIMS	
INSURANCE	
INTERNET	
LEGAL AND ACCOUNTING	
MEALS AND ENTERTAINMENT	
OFFICE	
TELEPHONE	
TRUCK FUEL	
TRUCK RENTALS	
UNIFORMS	

TOTAL TO FORM 1120S, PAGE 1, LINE 19	
--------------------------------------	--

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	3
------------	------------------------	-----------	---

DESCRIPTION	AMOUNT
-------------	--------

EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	
TOTAL TO SCHEDULE K, LINE 16C	

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COLLINS HOME DELIVERY, INC.

[REDACTED]

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	4
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## DESCRIPTION

## AMOUNT

BALANCE AT BEGINNING OF YEAR

NET INCOME PER BOOKS

DISTRIBUTIONS

OTHER INCREASES (DECREASES)

BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	5
--------------	---	-----------	---

## DESCRIPTION

## AMOUNT

NONDEDUCTIBLE EXPENSES

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

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ELECTRONIC FILING GENERAL NOTES AND EXPLANATIONS STATEMENT 6

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AMENDED RETURN STATEMENT

FORM, LINE AND/OR INSTRUCTION REFERENCE FOR GENERAL NOTE OR ELECTION

REGULATION REFERENCE FOR GENERAL NOTE OR ELECTION

DESCRIPTION FOR GENERAL NOTE OR ELECTION

EXPLANATION

TO AMEND RETURN TO ADD EXPENSES FOR JAN/FEB 2017 THAT WERE NOT REPORTED ON  
ORIGINAL RETURN FILED.**CONFIDENTIAL****MCOLLINS000063**

671117

## 2017

For calendar year 2017, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_

OMB No. 1545-0123

**Shareholder's Share of Current Year Income,  
Deductions, Credits, and Other Items**

<b>1</b>	Ordinary business income (loss)	<b>13</b>	Credits
<b>2</b>	Net rental real estate inc (loss)		
<b>3</b>	Other net rental income (loss)		
<b>4</b>	Interest income		
<b>5a</b>	Ordinary dividends		
<b>5b</b>	Qualified dividends	<b>14</b>	Foreign transactions
<b>6</b>	Royalties		
<b>7</b>	Net short-term capital gain (loss)		
<b>8a</b>	Net long-term capital gain (loss)		
<b>8b</b>	Collectibles (28%) gain (loss)		
<b>8c</b>	Unrecaptured sec 1250 gain		
<b>9</b>	Net section 1231 gain (loss)		
<b>10</b>	Other income (loss)	<b>15</b>	Alternative min tax (AMT) items
<b>11</b>	Section 179 deduction	<b>16</b>	Items affecting shareholder basis
<b>12</b>	Other deductions	<b>C*</b>	
		<b>D</b>	
		<b>17</b>	Other information

\*See attached statement for additional information.

\*See attached statement for additional information.

Schedule K-1 (Form 1120S) 2017

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2017.04030 COLLINS HOME DELIVERY, INC. 45105681

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**SCHEDULE K-1                      NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL	<hr/> <hr/>	

**CONFIDENTIAL****MCOLLINS000065**



<b>Form 1120S</b>		<b>U.S. Income Tax Return for an S Corporation</b>		OMB No. 1545-0123	
Department of the Treasury Internal Revenue Service		<b>2018</b>			
▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation. ▶ Go to <a href="http://www.irs.gov/Form1120S">www.irs.gov/Form1120S</a> for instructions and the latest information.					
For calendar year 2018 or tax year beginning _____, and ending _____					
<b>A</b> Selection effective date 03/23/2011		<b>Name</b> COLLINS HOME DELIVERY, INC.		<b>D</b> Employer identification number [REDACTED]	
<b>B</b> Business activity code number (see instructions) 492210		<b>Number, street, and room or suite no. If a P.O. box, see instructions.</b> 314 CAMERON HILL ROAD		<b>E</b> Date incorporated 03/23/2011	
<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>		<b>City or town, state or province, country, and ZIP or foreign postal code</b> ROCHESTER, NY 14612		<b>F</b> Total assets (see instructions) \$ [REDACTED]	
<b>G</b> Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed					
<b>H</b> Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation					
<b>I</b> Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">▶ 1</span>					
<b>Caution:</b> Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.					
<b>Income</b>	<b>1 a</b> Gross receipts or sales	<b>b</b> Return and allowances	<b>c</b> Bal. Subtract line 1b from line 1a	<b>1c</b>	
	<b>2</b> Cost of goods sold (attach Form 1125-A)			<b>2</b>	
	<b>3</b> Gross profit. Subtract line 2 from line 1c			<b>3</b>	
	<b>4</b> Net gain (loss) from Form 4797, line 17 (attach Form 4797)			<b>4</b>	
	<b>5</b> Other income (loss) (attach statement)			<b>5</b>	
	<b>6</b> Total income (loss). Add lines 3 through 5			<b>6</b>	
<b>Deductions (See instructions for limitations)</b>	<b>7</b> Compensation of officers (see instrs. - attach Form 1125-E)			<b>7</b>	
	<b>8</b> Salaries and wages (less employment credits)			<b>8</b>	
	<b>9</b> Repairs and maintenance			<b>9</b>	
	<b>10</b> Bad debts			<b>10</b>	
	<b>11</b> Rents			<b>11</b>	
	<b>12</b> Taxes and licenses	STATEMENT 1		<b>12</b>	
	<b>13</b> Interest (see instructions)			<b>13</b>	
	<b>14</b> Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			<b>14</b>	
	<b>15</b> Depletion (Do not deduct oil and gas depletion.)			<b>15</b>	
	<b>16</b> Advertising			<b>16</b>	
	<b>17</b> Pension, profit-sharing, etc., plans			<b>17</b>	
	<b>18</b> Employee benefit programs			<b>18</b>	
	<b>19</b> Other deductions (attach statement)	STATEMENT 2		<b>19</b>	
	<b>20</b> Total deductions. Add lines 7 through 19			<b>20</b>	
	<b>21</b> Ordinary business income (loss). Subtract line 20 from line 6			<b>21</b>	
<b>Tax and Payments</b>	<b>22 a</b> Excess net passive income or LIFO recapture tax (see instructions)	<b>22a</b>			
	<b>b</b> Tax from Schedule D (Form 1120S)	<b>22b</b>			
	<b>c</b> Add lines 22a and 22b			<b>22c</b>	
	<b>23 a</b> 2018 estimated tax payments and 2017 overpayment credited to 2018	<b>23a</b>			
	<b>b</b> Tax deposited with Form 7004	<b>23b</b>			
	<b>c</b> Credit for federal tax paid on fuels (attach Form 4136)	<b>23c</b>			
	<b>d</b> Refundable credit from Form 8827, line 8c	<b>23d</b>			
	<b>e</b> Add lines 23a through 23d			<b>23e</b>	
	<b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			<b>24</b>	
	<b>25</b> Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed			<b>25</b>	
	<b>26</b> Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid			<b>26</b>	
<b>27</b> Enter amount from line 26: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>			<b>27</b>		
<b>Sign Here</b> Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
Signature of officer		Date		Title	
[Signature]		[Signature]		PRESIDENT	
Print/type preparer's name		Preparer's signature		Date	
PAID Preparer Use Only		RICK J. BUCCI, CPA		06/05/20	
Firm's name		RICK J. BUCCI, CPA		Check if self-employed <input checked="" type="checkbox"/>	
Firm's address		2527 BAIRD ROAD		PTIN P00187264	
PENFIELD, NY 14526		Firm's EIN		** - ***9913	
		Phone no.		585-230-5239	
JWA 811701 12-12-18 For Paperwork Reduction Act Notice, see separate instructions. Form 1120S (2018)					

14000605 150828 [REDACTED]

2018.06050 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2018) **COLLINS HOME DELIVERY, INC.** Page 2

<b>Schedule B Other Information</b> (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) <span style="float: right;">▶</span>						
2 See the instructions and enter the:						
(a) Business activity <b>▶ DELIVERY SERVICES</b> (b) Product or service <b>▶ DELIVERY</b>						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock <span style="float: right;">▶</span>						
(ii) Total shares of non-restricted stock <span style="float: right;">▶</span>						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year <span style="float: right;">▶</span>						
(ii) Total shares of stock outstanding if all instruments were executed <span style="float: right;">▶</span>						
6 Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction?						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <span style="float: right;">▶ <input type="checkbox"/></span> If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years <span style="float: right;">▶ \$</span>						
9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions						X
10 Does the corporation satisfy one of the following conditions and the corporation doesn't own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions					X	
a The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year don't exceed \$25 million, and the corporation isn't a tax shelter; or						
b The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7). If "No," complete and attach Form 8990.						
11 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000						X
If "Yes," the corporation is not required to complete Schedules L and M-1.						

811711 02-07-19 JWA Form **1120S** (2018)



Form 1120S (2018)

COLLINS HOME DELIVERY, INC.

Page 3

Schedule B	Other Information (see instructions) (continued)	Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction <span style="float:right">▶ \$</span>		X
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a	Did the corporation make any payments in 2018 that would require it to file Form(s) 1099?	X	
	b If "Yes," did the corporation file or will it file all required Forms 1099?	X	
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 13 <span style="float:right">▶ \$</span>		X

Schedule K	Shareholders' Pro Rata Share Items	Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach statement)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a
	b Collectibles (28%) gain (loss)	8b
	c Unrecaptured section 1250 gain (attach statement)	8c
	9 Net section 1231 gain (loss) (attach Form 4797)	9
	10 Other income (loss) (see instructions) Type ▶	10
	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
	b Investment interest expense	12b
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)
	d Other deductions (see instructions) Type ▶	12d
Credits	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c
	d Other rental real estate credits (see instructions) Type ▶	13d
	e Other rental credits (see instructions) Type ▶	13e
	f Biofuel producer credit (attach Form 6478)	13f
	g Other credits (see instructions) Type ▶	13g
	14a Name of country or U.S. possession ▶	
Foreign Transactions	b Gross income from all sources	14b
	c Gross income sourced at shareholder level	14c
	Foreign gross income sourced at corporate level	
	d Section 951A category	14d
	e Foreign branch category	14e
	f Passive category	14f
	g General category	14g
	h Other (attach statement)	14h
	Deductions allocated and apportioned at shareholder level	
	i Interest expense	14i
	j Other	14j
	Deductions allocated and apportioned at corporate level to foreign source income	
	k Section 951A category	14k
	l Foreign branch category	14l
	m Passive category	14m
	n General category	14n
	o Other (attach statement)	14o
	Other information	
p Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14p	
q Reduction in taxes available for credit (attach statement)	14q	
r Other foreign tax information (attach statement)		

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Form 1120S (2018)

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2018.06050 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120S (2018) COLLINS HOME DELIVERY, INC. Page 4

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a		
	b Adjusted gain or loss	15b		
	c Depletion (other than oil and gas)	15c		
	d Oil, gas, and geothermal properties - gross income	15d		
	e Oil, gas, and geothermal properties - deductions	15e		
	f Other AMT items (attach statement)	15f		
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a		
	b Other tax-exempt income	16b		
	c Nondeductible expenses	16c	STATEMENT 5	
	d Distributions (attach statement if required)	16d		
	e Repayment of loans from shareholders	16e		
Other Information	17a Investment income	17a		
	b Investment expenses	17b		
	c Dividend distributions paid from accumulated earnings and profits	17c		
	d Other items and amounts (att. stmt.)		STATEMENT 3	
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p		18	

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts	( )	( )	( )	( )
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	( )	( )	( )	( )
11a	Depletable assets				
b	Less accumulated depletion	( )	( )	( )	( )
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	( )	( )	( )	( )
14	Other assets (att. stmt.)				
15	Total assets				
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings	STATEMENT 4			
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock	( )	( )	( )	( )
27	Total liabilities and shareholders' equity				

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COLLINS HOME DELIVERY, INC.

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**Schedule M-1****Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize): a Depreciation \$ b Travel and entertainment \$		7 Add lines 5 and 6	
4 Add lines 1 through 3		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	

**Schedule M-2****Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account (see instrs.)**

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year				
2 Ordinary income from page 1, line 21				
3 Other additions				
4 Loss from page 1, line 21				
5 Other reductions <b>STATEMENT 6</b>				
6 Combine lines 1 through 5				
7 Distributions				
8 Balance at end of tax year. Subtract line 7 from line 6				

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[REDACTED]

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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## DESCRIPTION

## AMOUNT

PAYROLL TAXES/BENEFITS  
NEW YORK TAXES - BASED ON INCOME

TOTAL TO FORM 1120S, PAGE 1, LINE 12

[REDACTED]

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
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## DESCRIPTION

## AMOUNT

ADMINISTRATIVE FEE  
AUTO EXPENSES  
BANK FEES  
CONTRACT LABOR  
DAMAGE CLAIMS  
INSURANCE  
INTERNET  
LEGAL AND ACCOUNTING  
MEALS  
OFFICE  
SMALL TOOLS  
TELEPHONE  
TRUCK FUEL  
TRUCK RENTALS

TOTAL TO FORM 1120S, PAGE 1, LINE 19

[REDACTED]

SCHEDULE K	OTHER ITEMS, LINE 17D	STATEMENT	3
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## DESCRIPTION

## AMOUNT

SECTION 199A - QUALIFIED BUSINESS INCOME  
SECTION 199A - W-2 WAGES  
SECTION 199A - UNADJUSTED BASIS OF ASSETS

[REDACTED]

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[REDACTED]

SCHEDULE L	ANALYSIS OF TOTAL RETAINED EARNINGS PER BOOKS	STATEMENT	4
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DESCRIPTION	AMOUNT
BALANCE AT BEGINNING OF YEAR	[REDACTED]
NET INCOME PER BOOKS	[REDACTED]
DISTRIBUTIONS	[REDACTED]
OTHER INCREASES (DECREASES)	[REDACTED]
BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COLUMN (D)	[REDACTED]

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	5
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DESCRIPTION	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	[REDACTED]
TOTAL TO SCHEDULE K, LINE 16C	[REDACTED]

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	6
--------------	---	-----------	---

DESCRIPTION	AMOUNT
NONDEDUCTIBLE EXPENSES	[REDACTED]
TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)	[REDACTED]

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Schedule K-1  
(Form 1120S)Department of the Treasury  
Internal Revenue ServiceFor calendar year 2018, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_

2018

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Shareholder's Share of Income, Deductions,  
Credits, etc. ▶ See separate instructions.

Part I Information About the Corporation	
A Corporation's employer identification number	13 Credits
B Corporation's name, address, city, state, and ZIP code	14 Foreign transactions
COLLINS HOME DELIVERY, INC. 314 CAMERON HILL ROAD ROCHESTER, NY 14612	6 Royalties
C IRS Center where corporation filed return	7 Net short-term capital gain (loss)
E-FILE	8a Net long-term capital gain (loss)
Part II Information About the Shareholder	8b Collectibles (28%) gain (loss)
D Shareholder's identifying number	8c Unrecaptured sec 1250 gain
E Shareholder's name, address, city, state and ZIP code	9 Net section 1231 gain (loss)
MICHAEL COLLINS	10 Other income (loss)
100.000000%	11 Section 179 deduction
	12 Other deductions
	16 Items affecting shareholder basis
	17 Other information

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11-28-18

JWA For Paperwork Reduction Act Notice, see Instructions for Form 1120S.

www.irs.gov/Form1120S

Schedule K-1 (Form 1120S) 2018

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**SCHEDULE K-1** **NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

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## SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 17, UNDER CODES V, W, X, Y AND Z. THE CHARITABLE CONTRIBUTIONS, INVESTMENT INTEREST EXPENSE, DEDUCTIONS - ROYALTY INCOME SECTION 59(E)(2) EXPENDITURES AND DEDUCTIONS - OTHER PORTFOLIO AMOUNTS ARE NOT INCLUDED IN THE CALCULATION OF THE QUALIFIED BUSINESS INCOME AMOUNT UNDER CODE V. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 SECTION 199A ITEMS, BOX 17  
CODES V THROUGH Z

CODE	DESCRIPTION	AMOUNT
V	TRADE OR BUSINESS QUALIFIED BUSINESS INCOME * * INCLUDED ORDINARY INCOME(LOSS)	
W	W-2 WAGES	
X	UNADJUSTED BASIS	
Y	REIT DIVIDENDS	
Z	PTP INCOME	

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<b>Form 1120-S</b>		<b>U.S. Income Tax Return for an S Corporation</b>		OMB No. 1545-0123	
Department of the Treasury Internal Revenue Service		<b>2019</b>			
For calendar year 2019 or tax year beginning _____, ending _____					
<b>A</b> Selection effective date 03/23/2011		<b>Name</b> COLLINS HOME DELIVERY, INC.		<b>D</b> Employer identification number [REDACTED]	
<b>B</b> Business activity code number (see instructions) 492210		<b>Number, street, and room or suite no. If a P.O. box, see instructions.</b> 314 CAMERON HILL ROAD		<b>E</b> Date incorporated 03/23/2011	
<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>		<b>City or town, state or province, country, and ZIP or foreign postal code</b> ROCHESTER, NY 14612		<b>F</b> Total assets (see instructions) \$ 0.	
<b>G</b> Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed					
<b>H</b> Check if: (1) <input checked="" type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation					
<b>I</b> Enter the number of shareholders who were shareholders during any part of the tax year <span style="float:right">1</span>					
<b>J</b> Check if corporation: (1) <input type="checkbox"/> Aggregated activities for section 465 at-risk purposes (2) <input type="checkbox"/> Grouped activities for section 469 passive activity purposes					
<b>Caution:</b> Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.					
<b>Income</b>	<b>1 a</b> Gross receipts or sales	<b>b</b> Return and allowances	<b>c</b> Bal. Subtract line 1b from line 1a	<b>1c</b>	
	<b>2</b> Cost of goods sold (attach Form 1125-A)			<b>2</b>	
	<b>3</b> Gross profit. Subtract line 2 from line 1c			<b>3</b>	
	<b>4</b> Net gain (loss) from Form 4797, line 17 (attach Form 4797)			<b>4</b>	
	<b>5</b> Other income (loss) (attach statement)			<b>5</b>	
	<b>6</b> Total income (loss). Add lines 3 through 5			<b>6</b>	
<b>Deductions (See instructions for limitations)</b>	<b>7</b> Compensation of officers (see instrs. - attach Form 1125-E)			<b>7</b>	
	<b>8</b> Salaries and wages (less employment credits)			<b>8</b>	
	<b>9</b> Repairs and maintenance			<b>9</b>	
	<b>10</b> Bad debts			<b>10</b>	
	<b>11</b> Rents			<b>11</b>	
	<b>12</b> Taxes and licenses	STATEMENT 1		<b>12</b>	
	<b>13</b> Interest (see instructions)			<b>13</b>	
	<b>14</b> Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			<b>14</b>	
	<b>15</b> Depletion (Do not deduct oil and gas depletion.)			<b>15</b>	
	<b>16</b> Advertising			<b>16</b>	
	<b>17</b> Pension, profit sharing, etc., plans			<b>17</b>	
<b>18</b> Employee benefit programs			<b>18</b>		
<b>19</b> Other deductions (attach statement)	STATEMENT 2		<b>19</b>		
<b>20</b> Total deductions. Add lines 7 through 19			<b>20</b>		
<b>21</b> Ordinary business income (loss). Subtract line 20 from line 6			<b>21</b>		
<b>Tax and Payments</b>	<b>22 a</b> Excess net passive income or LIFO recapture tax (see instructions)	<b>22a</b>		<b>22a</b>	
	<b>b</b> Tax from Schedule D (Form 1120-S)	<b>22b</b>		<b>22b</b>	
	<b>c</b> Add lines 22a and 22b			<b>22c</b>	
	<b>23 a</b> 2019 estimated tax payments and 2018 overpayment credited to 2019	<b>23a</b>		<b>23a</b>	
	<b>b</b> Tax deposited with Form 7004	<b>23b</b>		<b>23b</b>	
	<b>c</b> Credit for federal tax paid on fuels (attach Form 4136)	<b>23c</b>		<b>23c</b>	
	<b>d</b> Reserved for future use	<b>23d</b>		<b>23d</b>	
	<b>e</b> Add lines 23a through 23d			<b>23e</b>	
	<b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			<b>24</b>	
	<b>25</b> Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed			<b>25</b>	
<b>26</b> Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid			<b>26</b>		
<b>27</b> Enter amount from line 26: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>			<b>27</b>		
<b>Sign Here</b> Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
Signature of officer		Date		Title	
[Signature]		[Date]		PRESIDENT	
Print/Type preparer's name		Preparer's signature		Date	
PAID Preparer Use Only		RICK J. BUCCI, CPA		02/09/21	
Firm's name		RICK J. BUCCI, CPA		Check if self-employed <input checked="" type="checkbox"/>	
Firm's address		2527 BAIRD ROAD		PTIN P00187264	
PENFIELD, NY 14526				Firm's EIN ***-***9913	
				Phone no. 585-230-5239	
LHA For Paperwork Reduction Act Notice, see separate instructions. 911701 12-30-19 Form 1120-S (2019)					

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2019.05040 COLLINS HOME DELIVERY, INC. 45105681

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Form 1120-S (2019) <b>COLLINS HOME DELIVERY, INC.</b>					Page <b>2</b>	
<b>Schedule B Other Information</b> (see instructions)					Yes	No
<b>1</b> Check accounting method: <b>a</b> <input type="checkbox"/> Cash <b>b</b> <input checked="" type="checkbox"/> Accrual <b>c</b> <input type="checkbox"/> Other (specify) _____						
<b>2</b> See the instructions and enter the: <b>a</b> Business activity <b>DELIVERY SERVICES</b> <b>b</b> Product or service <b>DELIVERY</b>						
<b>3</b> At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						<b>X</b>
<b>4</b> At the end of the tax year, did the corporation: <b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						<b>X</b>
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						<b>X</b>
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
<b>5a</b> At the end of the tax year, did the corporation have any outstanding shares of restricted stock? _____ If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock _____ (ii) Total shares of non-restricted stock _____						<b>X</b>
<b>b</b> At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? _____ If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year _____ (ii) Total shares of stock outstanding if all instruments were executed _____						<b>X</b>
<b>6</b> Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide info. on any reportable transaction? _____						<b>X</b>
<b>7</b> Check this box if the corporation issued publicly offered debt instruments with original issue discount _____ If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.						
<b>8</b> If the corporation <b>(a)</b> was a C corporation before it elected to be an S corporation <b>or</b> the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation <b>and</b> <b>(b)</b> has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years _____ \$ _____						
<b>9</b> Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions _____						<b>X</b>
<b>10</b> Does the corporation satisfy one or more of the following? See instructions <b>a</b> The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense. <b>b</b> The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense. <b>c</b> The corporation is a tax shelter and the corporation has business interest expense. If "Yes," complete and attach Form 8990.						<b>X</b>
<b>11</b> Does the corporation satisfy <b>both</b> of the following conditions? <b>a</b> The corporation's total receipts (see instructions) for the tax year were less than \$250,000. <b>b</b> The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.					<b>X</b>	

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Form **1120-S** (2019)

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Form 1120-S (2019)

COLLINS HOME DELIVERY, INC.

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Schedule B	Other Information (see instructions) (continued)	Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction ▶ \$		X
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a	Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?	X	
	b If "Yes," did the corporation file or will it file required Form(s) 1099?	X	
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 14 ▶ \$		X

Schedule K	Shareholders' Pro Rata Share Items	Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach statement)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Interest income	4
	5 Dividends: a Ordinary dividends	5a
	b Qualified dividends	5b
	6 Royalties	6
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a
	b Collectibles (28%) gain (loss)	8b
	c Unrecaptured section 1250 gain (attach statement)	8c
	9 Net section 1231 gain (loss) (attach Form 4797)	9
	10 Other income (loss) (see instructions) Type ▶	10
	11 Section 179 deduction (attach Form 4562)	11
	12a Charitable contributions	12a
	b Investment interest expense	12b
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)
	d Other deductions (see instructions) Type ▶	12d
Credits	13a Low-income housing credit (section 42(j)(5))	13a
	b Low-income housing credit (other)	13b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3460, if applicable)	13c
	d Other rental real estate credits (see instructions) Type ▶	13d
	e Other rental credits (see instructions) Type ▶	13e
	f Biofuel producer credit (attach Form 6478)	13f
	g Other credits (see instructions) Type ▶	13g
	14a Name of country or U.S. possession ▶	
Foreign Transactions	b Gross income from all sources	14b
	c Gross income sourced at shareholder level	14c
	Foreign gross income sourced at corporate level	
	d Reserved for future use	14d
	e Foreign branch category	14e
	f Passive category	14f
	g General category	14g
	h Other (attach statement)	14h
	Deductions allocated and apportioned at shareholder level	
	i Interest expense	14i
	j Other	14j
	Deductions allocated and apportioned at corporate level to foreign source income	
	k Reserved for future use	14k
	l Foreign branch category	14l
	m Passive category	14m
	n General category	14n
	o Other (attach statement)	14o
	Other information	
p Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶	14p	
q Reduction in taxes available for credit (attach statement)	14q	
r Other foreign tax information (attach statement)		

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Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a		
	b Adjusted gain or loss	15b		
	c Depletion (other than oil and gas)	15c		
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	e Oil, gas, and geothermal properties - deductions	15e		
	f Other AMT items (attach statement)	15f		
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	b Other tax-exempt income	16b		
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Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p		18	

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts	( )	( )	( )	( )
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation	( )	( )	( )	( )
11a	Depletable assets				
b	Less accumulated depletion	( )	( )	( )	( )
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	( )	( )	( )	( )
14	Other assets (att. stmt.)				
15	Total assets				
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock				
23	Additional paid-in capital				
24	Retained earnings				
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock	( )	( )	( )	( )
27	Total liabilities and shareholders' equity				

Form 1120-S (2019)

911731  
12-30-19

Form 1120-S (2019)

COLLINS HOME DELIVERY, INC.

Page 5

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3. See instructions.

<b>1</b> Net income (loss) per books		<b>5</b> Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): <b>a</b> Tax-exempt interest \$	
<b>2</b> Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		<b>6</b> Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize): <b>a</b> Depreciation \$	
<b>3</b> Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize): <b>a</b> Depreciation \$ <b>b</b> Travel and entertainment \$		<b>7</b> Add lines 5 and 6	
<b>4</b> Add lines 1 through 3		<b>8</b> Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	

**Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account (see instrs.)**

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
<b>1</b> Balance at beginning of tax year				
<b>2</b> Ordinary income from page 1, line 21				
<b>3</b> Other additions				
<b>4</b> Loss from page 1, line 21	(	)		
<b>5</b> Other reductions <b>STATEMENT 5</b>	(	)		(
<b>6</b> Combine lines 1 through 5				
<b>7</b> Distributions				
<b>8</b> Balance at end of tax year. Subtract line 7 from line 6				

Form 1120-S (2019)

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12-30-19

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21110209 150828

2019.05040 COLLINS HOME DELIVERY, INC. 45105681

CONFIDENTIAL

MCOLLINS000080



CONFIDENTIAL

COLLINS HOME DELIVERY, INC.

FORM 1120S	TAXES AND LICENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
-------------	--------

NEW YORK TAXES - BASED ON INCOME

TOTAL TO FORM 1120S, PAGE 1, LINE 12

FORM 1120S	OTHER DEDUCTIONS	STATEMENT	2
------------	------------------	-----------	---

DESCRIPTION	AMOUNT
-------------	--------

ADMINISTRATIVE FEE

AUTO EXPENSES

BANK FEES

CONTRACT LABOR

DAMAGE CLAIMS

INSURANCE

INTERNET

LEGAL AND ACCOUNTING

MEALS

SMALL TOOLS

TELEPHONE

TRAVEL

TRUCK FUEL

TRUCK RENTALS

TOTAL TO FORM 1120S, PAGE 1, LINE 19

SCHEDULE K	OTHER ITEMS, LINE 17D	STATEMENT	3
------------	-----------------------	-----------	---

DESCRIPTION	AMOUNT
-------------	--------

SECTION 199A - ORDINARY INCOME (LOSS)

SECTION 199A - UNADJUSTED BASIS OF ASSETS



CONFIDENTIAL

COLLINS HOME DELIVERY, INC.

[REDACTED]

SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT	4
------------	------------------------	-----------	---

DESCRIPTION

AMOUNT

EXCLUDED MEALS AND ENTERTAINMENT EXPENSES

[REDACTED]

TOTAL TO SCHEDULE K, LINE 16C

SCHEDULE M-2	ACCUMULATED ADJUSTMENTS ACCOUNT- OTHER REDUCTIONS	STATEMENT	5
--------------	---	-----------	---

DESCRIPTION

AMOUNT

NONDEDUCTIBLE EXPENSES

[REDACTED]

TOTAL TO SCHEDULE M-2, LINE 5 - COLUMN (A)

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M000000082

1

671119

**Schedule K-1  
(Form 1120-S)**Department of the Treasury  
Internal Revenue ServiceFor calendar year 2019, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_**2019**☒ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Shareholder's Share of Income, Deductions,  
Credits, etc.** ▶ See separate instructions.**Part I Information About the Corporation****A** Corporation's employer identification number**B** Corporation's name, address, city, state, and ZIP codeCOLLINS HOME DELIVERY, INC.  
314 CAMERON HILL ROAD  
ROCHESTER, NY 14612**C** IRS Center where corporation filed return**E-FILE****Part II Information About the Shareholder****D** Shareholder's identifying number**E** Shareholder's name, address, city, state and ZIP code

MICHAEL COLLINS

**F** Shareholder's percentage of stock  
ownership for tax year 100.000000%**Part III Shareholder's Share of Current Year Income,  
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	13	Credits
2	Net rental real estate inc (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured sec 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative min tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
		C*	
12	Other deductions	D	
		17	Other information
		V *	STMT
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		

\*See attached statement for additional information.

911271  
11-15-19 LHA For Paperwork Reduction Act Notice, see Instructions for Form 1120-S.

www.irs.gov/Form1120S

Schedule K-1 (Form 1120-S) 2019

8

1

21110209 150828 2019.05040 COLLINS HOME DELIVERY, INC. 45105681

CONFIDENTIAL

MCOLLINS000083

**CONFIDENTIAL**

COLLINS HOME DELIVERY, INC.





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**SCHEDULE K-1** **NONDEDUCTIBLE EXPENSES, BOX 16, CODE C**

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DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES		SEE SHAREHOLDERS INSTRUCTIONS
TOTAL		

**CONFIDENTIAL****MCOLLINS000084**

COLLINS HOME DELIVERY, INC.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 17, UNDER CODE V. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 SECTION 199A ITEMS, BOX 17  
CODE V

DESCRIPTION

AMOUNT

TRADE OR BUSINESS

ORDINARY INCOME(LOSS)  
UNADJUSTED BASIS



# **EXHIBIT 2**

CONFIDENTIAL

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>949-248-7501</b>			OMB No. 1545-0115 <b>2011</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy B</b> <b>For Recipient</b> This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
PAYER'S Federal Tax ID <b>33-0925997</b>			RECIPIENT'S identification No. [REDACTED]		
RECIPIENT'S Name and Address  <b>David Traina</b> [REDACTED]			1 Rents 2 Royalties 3 Other Income 4 Fed income tax withheld 5 Fishing boat proceeds 6 Med & health care pmts 7 Nonemployee Compensation <b>\$ 6508.89</b> 8 Pmts in lieu of Div or Int 9 Payer made direct sales of \$5000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> 10 Crop insurance proceeds 13 Excess Golden Par Pmts 14 Gross paid to an attorney		
Account Number <b>124</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	

Form **1099-MISC** (Keep for your records.) Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>949-248-7501</b>			OMB No. 1545-0115 <b>2011</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy 2</b> <b>To be filed with recipient's state income tax return, when required.</b>
PAYER'S Federal Tax ID <b>33-0925997</b>			RECIPIENT'S identification No. [REDACTED]		
RECIPIENT'S Name and Address  <b>David Traina</b> [REDACTED]			1 Rents 2 Royalties 3 Other Income 4 Fed income tax withheld 5 Fishing boat proceeds 6 Med & health care pmts 7 Nonemployee Compensation <b>\$ 6508.89</b> 8 Pmts in lieu of Div or Int 9 Payer made direct sales of \$5000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> 10 Crop insurance proceeds 13 Excess Golden Par Pmts 14 Gross paid to an attorney		
Account Number <b>124</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	

Form **1099-MISC** Department of the Treasury - Internal Revenue Service

**Instructions for Recipient**

2011 Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES. Individuals must report these amounts as explained in the box 7 instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your income correctly.

Box 7. Shows nonemployee compensation. If you are in the trade or business of catching fish, box 7 may show cash you received for the sale of fish. If the amount in this box is SE income, report it on Schedule C or E (Form 1040), and complete Schedule SE (Form 1040). You received this form instead of Form W-2 because the payer did not consider you an employee and did not withhold income tax or social security and Medicare tax. If you believe you are an employee and cannot get the payer to correct this form, report the amount from box 7 on Form 1040, line 7 (or Form 1040NR, line 8). You must also complete Form 8919 and attach it to your return. If you are not an employee but the amount in this box is not SE income (for example, it is income from a sporadic activity or a hobby), report it on Form 1040, line 21 (or Form 1040NR, line 21).

R1 Format(c)www.1099Express.com

**HomeDeliveryLink, Inc.**  
**32236 Paseo Adelanto Suite C**  
**San Juan Capistrano, CA 92675**

Important Tax Return Document Enclosed

**David Traina**  
[REDACTED]

CONFIDENTIAL

TRAINA000001

**CONFIDENTIAL**

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>949-248-7501</b>			OMB No. 1545-0115 <b>2012</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy B</b> <b>For Recipient</b> This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.		
PAYER'S Federal Tax ID <b>33-0925977</b>			RECIPIENT'S identification No. [REDACTED]				
RECIPIENT'S Name and Address  <b>David Traina</b> [REDACTED]			7 Nonemployee Compensation <b>\$ 26859.33</b>				
			8 Pmts in lieu of Div or Int				
Account Number <b>David Traina</b>			15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
Form <b>1099-MISC</b>			(Keep for your records.)			Department of the Treasury - Internal Revenue Service	

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>949-248-7501</b>			OMB No. 1545-0115 <b>2012</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy 2</b> <b>To be filed with recipient's state income tax return, when required.</b>		
PAYER'S Federal Tax ID <b>33-0925977</b>			RECIPIENT'S identification No. [REDACTED]				
RECIPIENT'S Name and Address  <b>David Traina</b> [REDACTED]			7 Nonemployee Compensation <b>\$ 26859.33</b>				
			8 Pmts in lieu of Div or Int				
Account Number <b>David Traina</b>			15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
Form <b>1099-MISC</b>						Department of the Treasury - Internal Revenue Service	

**Instructions for Recipient**

2012 Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. If your net income from self-employment is \$400 or more, you must file a return and compute your SE tax on Schedule SE (Form 1040). See Pub. 334 for more information. If no income or social security and Medicare taxes were withheld and you are still receiving these payments, see Form 1040-ES. Individuals must report these amounts as explained in the box / instructions on this page. Corporations, fiduciaries, or partnerships must report the amounts on the proper line of their tax returns.

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**HomeDeliveryLink, Inc.**  
**32236 Paseo Adelanto Suite C**  
**San Juan Capistrano, CA 92675**

Important Tax Return Document Enclosed

**David Traina**  
[REDACTED]

**CONFIDENTIAL****TRAINA000002**



**CONFIDENTIAL**

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc. 32236 Paseo Adelanto Suite C San Juan Capistrano, CA 92675 9492487501</b>			OMB No. 1545-0115 <b>2014</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy B For Recipient</b> This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
PAYER'S Federal Tax ID <b>330925997</b>		RECIPIENT'S identification No. [REDACTED]		1 Rents	
RECIPIENT'S Name and Address  <b>Traina Services LLC David Traina</b> [REDACTED]		2 Royalties		3 Other Income	
4 Fed income tax withheld		5 Fishing boat proceeds		6 Med & health care pmts	
7 Nonemployee Compensation <b>\$ 123800.11</b>		8 Pmts in lieu of Div or Int		9 Payer made direct sales of \$5000 or more of consumer products <input type="checkbox"/>	
10 Crop Insurance proceeds		11		12	
13 Excess Golden Par Pmts		14 Gross paid to an attorney		15	
Account Number <b>116</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income

Form **1099-MISC** (Keep for your records.) Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc. 32236 Paseo Adelanto Suite C San Juan Capistrano, CA 92675 9492487501</b>			OMB No. 1545-0115 <b>2014</b> 1099-MISC		<b>Miscellaneous Income</b>  <b>Copy 2 To be filed with recipient's state income tax return, when required.</b>
PAYER'S Federal Tax ID <b>330925997</b>		RECIPIENT'S identification No. [REDACTED]		1 Rents	
RECIPIENT'S Name and Address  <b>Traina Services LLC David Traina</b> [REDACTED]		2 Royalties		3 Other Income	
4 Fed income tax withheld		5 Fishing boat proceeds		6 Med & health care pmts	
7 Nonemployee Compensation <b>\$ 123800.11</b>		8 Pmts in lieu of Div or Int		9 Payer made direct sales of \$5000 or more of consumer products <input type="checkbox"/>	
10 Crop Insurance proceeds		11		12	
13 Excess Golden Par Pmts		14 Gross paid to an attorney		15	
Account Number <b>116</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income

Form **1099-MISC** Department of the Treasury - Internal Revenue Service

**Instructions for Recipient**

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**HomeDeliveryLink, Inc.  
32236 Paseo Adelanto Suite C  
San Juan Capistrano, CA 92675**

Important Tax Return Document Enclosed

**Traina Services LLC  
David Traina**  
[REDACTED]

**CONFIDENTIAL****TRAINA000003**



**CONFIDENTIAL**

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>9492487501</b>			1 Rents	OMB No. 1545-0115		<b>Miscellaneous Income</b>
			2 Royalties	<b>2016</b>		
			3 Other Income	1099-MISC		
			4 Fed income tax withheld			
PAYER'S Federal Tax ID <b>33-0925997</b>	RECIPIENT'S identification No. [REDACTED]		5 Fishing boat proceeds	6 Med & health care pmts		<b>Copy B For Recipient</b> This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S Name and Address  <b>Traina Services LLC</b> <b>Attn: David Traina</b> [REDACTED]		7 Nonemployee Compensation <b>\$ 235618.85</b>	8 Pmts in lieu of Div or Int			
		9 Payer made direct sales of \$5000 or more of consumer products <input type="checkbox"/>	10 Crop Insurance proceeds			
		11	12			
		13 Excess Golden Par Pmts	14 Gross paid to an attorney			
Account Number <b>TNA - David Traina</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income	

Form **1099-MISC** (Keep for your records.) Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, and ZIP code <b>HomeDeliveryLink, Inc.</b> <b>32236 Paseo Adelanto Suite C</b> <b>San Juan Capistrano, CA 92675</b> <b>9492487501</b>			1 Rents	OMB No. 1545-0115		<b>Miscellaneous Income</b>
			2 Royalties	<b>2016</b>		
			3 Other Income	1099-MISC		
			4 Fed income tax withheld			
PAYER'S Federal Tax ID <b>33-0925997</b>	RECIPIENT'S identification No. [REDACTED]		5 Fishing boat proceeds	6 Med & health care pmts		<b>Copy 2 To be filed with recipient's state income tax return, when required.</b>
RECIPIENT'S Name and Address  <b>Traina Services LLC</b> <b>Attn: David Traina</b> [REDACTED]		7 Nonemployee Compensation [REDACTED]	8 Pmts in lieu of Div or Int			
		9 Payer made direct sales of \$5000 or more of consumer products <input type="checkbox"/>	10 Crop Insurance proceeds			
		11	12			
		13 Excess Golden Par Pmts	14 Gross paid to an attorney			
Account Number <b>TNA - David Traina</b>	15a Sec 409A deferrals	15b Sec 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income	

Form **1099-MISC** Department of the Treasury - Internal Revenue Service

**Instructions for Recipient**

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R19 Form1099-MISC Express.com

**HomeDeliveryLink, Inc.**  
**32236 Paseo Adelanto Suite C**  
**San Juan Capistrano, CA 92675**

Important Tax Return Document Enclosed

**Traina Services LLC**  
**Attn: David Traina**  
[REDACTED]

**CONFIDENTIAL****TRAINA000004**



CONFIDENTIAL

**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2011**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)**► For information on Schedule C and its instructions, go to [www.irs.gov/schedulec](http://www.irs.gov/schedulec)**  
**► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

Name of proprietor

DAVID S TRAINA

Social security number (SSN)

[REDACTED]

**A** Principal business or profession, including product or service (see instructions)  
SALES**B** Enter code from instructions

► 9 9 9 9 9 9

**C** Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), (see instr.)

[REDACTED]

**E** Business address (including suite or room no.) ► [REDACTED]

City, town or post office, state, and ZIP code [REDACTED]

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2011, check here ☐**I** Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file all required Forms 1099? ☐ Yes ☐ No**Part I Income****1a** Merchant card and third party payments. For 2011, enter -0-**1a** 0**b** Gross receipts or sales not entered on line 1a (see instructions)**1b** [REDACTED]**c** Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. **Caution.** See instr. before completing this line**1c** [REDACTED]**d** **Total gross receipts.** Add lines 1a through 1c**1d** [REDACTED]**2** Returns and allowances plus any other adjustments (see instructions)**2** [REDACTED]**3** Subtract line 2 from line 1d**3** [REDACTED]**4** Cost of goods sold (from line 42)**4** [REDACTED]**5** **Gross profit.** Subtract line 4 from line 3**5** [REDACTED]**6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)**6** [REDACTED]**7** **Gross income.** Add lines 5 and 6**7** [REDACTED]**Part II Expenses****Enter expenses for business use of your home only on line 30.****8** Advertising**8** [REDACTED]**9** Car and truck expenses (see instructions)**9** [REDACTED]**10** Commissions and fees**10** [REDACTED]**11** Contract labor (see instructions)**11** [REDACTED]**12** Depletion**12** [REDACTED]**13** Depreciation and section 179 expense deduction (not included in Part III) (see instructions)**13** 0**14** Employee benefit programs (other than on line 19)**14** [REDACTED]**15** Insurance (other than health)**15** [REDACTED]**16** Interest:**a** Mortgage (paid to banks, etc.)**16a** [REDACTED]**b** Other**16b** [REDACTED]**17** Legal and professional services**17** [REDACTED]**18** Office expense (see instructions)**18** [REDACTED]**19** Pension and profit-sharing plans**19** [REDACTED]**20** Rent or lease (see instructions):**a** Vehicles, machinery, and equipment**20a** [REDACTED]**b** Other business property**20b** [REDACTED]**21** Repairs and maintenance**21** [REDACTED]**22** Supplies (not included in Part III)**22** [REDACTED]**23** Taxes and licenses**23** [REDACTED]**24** Travel, meals, and entertainment:**a** Travel**24a** [REDACTED]**b** Deductible meals and

entertainment (see instructions)

**24b** [REDACTED]**25** Utilities**25** [REDACTED]**26** Wages (less employment credits)**26** [REDACTED]**27a** Other expenses (from line 48)**27a** [REDACTED]**b** Reserved for future use**27b** [REDACTED]**28** **Total expenses** before expenses for business use of home. Add lines 8 through 27a**28** [REDACTED]**29** Tentative profit or (loss). Subtract line 28 from line 7**29** [REDACTED]**30** Expenses for business use of your home. Attach **Form 8829**. Do not report such expenses elsewhere**30** [REDACTED]**31** **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040**, line 12 (or **Form 1040NR**, line 13) and on **Schedule SE**, line 2. If you entered an amount on line 1c, see instr. Estates and trusts, enter on **Form 1041**, line 3.

- If a loss, you **must** go to line 32.

**32** If you have a loss, check the box that describes your investment in this activity (see instructions).

- If you checked 32a, enter the loss on both **Form 1040**, line 12, (or **Form 1040NR**, line 13) and on **Schedule SE**, line 2. If you entered an amount on line 1c, see the instructions for line 31. Estates and trusts, enter on **Form 1041**, line 3.

- If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.For Paperwork Reduction Act Notice, see your tax return instructions. **BAA**

REV 01/11/12 TTD

Schedule C (Form 1040) 2011

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33 Method(s) used to value closing inventory:      a ☐ Cost                      b ☐ Lower of cost or market                      c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
If "Yes," attach explanation . . . . . ☐ Yes                      ☐ No

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . . .	35	
36	Purchases less cost of items withdrawn for personal use . . . . .	36	
37	Cost of labor. Do not include any amounts paid to yourself . . . . .	37	
38	Materials and supplies . . . . .	38	
39	Other costs . . . . .	39	
40	Add lines 35 through 39 . . . . .	40	
41	Inventory at end of year . . . . .	41	
42	<b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4 . . . . .	42	

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ \_\_\_\_\_

44 Of the total number of miles you drove your vehicle during 2011, enter the number of miles you used your vehicle for:

a Business \_\_\_\_\_ b Commuting (see instructions) \_\_\_\_\_ c Other \_\_\_\_\_

45 Was your vehicle available for personal use during off-duty hours? . . . . . ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? . . . . . ☐ Yes ☐ No

47a Do you have evidence to support your deduction? . . . . . ☐ Yes ☐ No

b If "Yes," is the evidence written? . . . . . ☐ Yes ☐ No

<b>48</b> Total other expenses. Enter here and on line 27a	<b>48</b>



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**SCHEDULE C**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

► For information on Schedule C and its instructions, go to [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

**2012**  
 Attachment  
 Sequence No. **09**

Name of proprietor

DAVID S TRAINA

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)  
 SERVICE: TRUCKING
**B** Enter code from instructions

► 9 9 9 9 9 9

**C** Business name. If no separate business name, leave blank.**D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2012? If "No," see instructions for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2012, check here ☐**I** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No**Part I Income**

- 1** Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐ **1**
- 2** Returns and allowances (see instructions) **2**
- 3** Subtract line 2 from line 1 **3**
- 4** Cost of goods sold (from line 42) **4**
- 5** **Gross profit.** Subtract line 4 from line 3 **5**
- 6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) **6**
- 7** **Gross income.** Add lines 5 and 6 **7**

**Part II Expenses**

Enter expenses for business use of your home only on line 30.

- |  |   |
|--|---|
| <b>8</b> Advertising <b>8</b>  | <b>18</b> Office expense (see instructions) <b>18</b>                     |
| <b>9</b> Car and truck expenses (see instructions) <b>9</b>  | <b>19</b> Pension and profit-sharing plans <b>19</b>                      |
| <b>10</b> Commissions and fees <b>10</b>   | <b>20</b> Rent or lease (see instructions):                               |
| <b>11</b> Contract labor (see instructions) <b>11</b>  | <b>a</b> Vehicles, machinery, and equipment <b>20a</b>                    |
| <b>12</b> Depletion <b>12</b>  | <b>b</b> Other business property <b>20b</b>                               |
| <b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions) <b>13</b> | <b>21</b> Repairs and maintenance <b>21</b>                               |
| <b>14</b> Employee benefit programs (other than on line 19) <b>14</b>  | <b>22</b> Supplies (not included in Part III) <b>22</b>                   |
| <b>15</b> Insurance (other than health) <b>15</b>  | <b>23</b> Taxes and licenses <b>23</b>                                    |
| <b>16</b> Interest:  | <b>24</b> Travel, meals, and entertainment:                               |
| <b>a</b> Mortgage (paid to banks, etc.) <b>16a</b>   | <b>a</b> Travel <b>24a</b>  |
| <b>b</b> Other <b>16b</b>  | <b>b</b> Deductible meals and entertainment (see instructions) <b>24b</b> |
| <b>17</b> Legal and professional services <b>17</b>  | <b>25</b> Utilities <b>25</b>   |
|  | <b>26</b> Wages (less employment credits) <b>26</b>                       |
|  | <b>27a</b> Other expenses (from line 48) <b>27a</b>                       |
|  | <b>b</b> Reserved for future use <b>27b</b>                               |

- 28** **Total expenses** before expenses for business use of home. Add lines 8 through 27a **28**
- 29** Tentative profit or (loss). Subtract line 28 from line 7 **29**
- 30** Expenses for business use of your home. Attach Form 8829. Do not report such expenses elsewhere **30**
- 31** **Net profit or (loss).** Subtract line 30 from line 29.

• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If a loss, you must go to line 32.

**32** If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

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Schedule C (Form 1040) 2012

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33 Method(s) used to value closing inventory:      a ☐ Cost      b ☐ Lower of cost or market      c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
If "Yes," attach explanation . . . . . ☐ Yes ☐ No

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . . .	35	
36	Purchases less cost of items withdrawn for personal use . . . . .	36	
37	Cost of labor. Do not include any amounts paid to yourself . . . . .	37	
38	Materials and supplies . . . . .	38	
39	Other costs . . . . .	39	
40	Add lines 35 through 39 . . . . .	40	
41	Inventory at end of year . . . . .	41	
42	<b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4 . . . . .	42	

43 When did you place your vehicle in service for business purposes? (month, day, year) ►

44 Of the total number of miles you drove your vehicle during 2012, enter the number of miles you used your vehicle for:

**a Business**                      **b Commuting (see instructions)**                      **c Other**

45 Was your vehicle available for personal use during off-duty hours? . . . . . ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? . . . . . ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

## START UP COSTS

### NON REEMBURSED EXPENSES

48	Total other expenses. Enter here and on line 27a . . . . .	48	
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**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2013**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)► For information on Schedule C and its instructions, go to [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

DAVID TRAINA

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)

TRUCKING

**B** Enter code from instructions

► 4 8 4 1 1 0

**C** Business name. If no separate business name, leave blank.

J-D SERVICES

**D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2013? If "No," see instructions for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2013, check here ☐**I** Did you make any payments in 2013 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No**Part I Income**

- 1** Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐
- 2** Returns and allowances
- 3** Subtract line 2 from line 1
- 4** Cost of goods sold (from line 42)
- 5** **Gross profit.** Subtract line 4 from line 3
- 6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)
- 7** **Gross income.** Add lines 5 and 6

1  
2  
3  
4  
5  
6  
7**Part II Expenses**

Enter expenses for business use of your home only on line 30.

- 8** Advertising
- 9** Car and truck expenses (see instructions)
- 10** Commissions and fees
- 11** Contract labor (see instructions)
- 12** Depletion
- 13** Depreciation and section 179 expense deduction (not included in Part III) (see instructions)
- 14** Employee benefit programs (other than on line 19)
- 15** Insurance (other than health)
- 16** Interest:
- a** Mortgage (paid to banks, etc.)
- b** Other
- 17** Legal and professional services
- 18** Office expense (see instructions)
- 19** Pension and profit-sharing plans
- 20** Rent or lease (see instructions):
- a** Vehicles, machinery, and equipment
- b** Other business property
- 21** Repairs and maintenance
- 22** Supplies (not included in Part III)
- 23** Taxes and licenses
- 24** Travel, meals, and entertainment:
- a** Travel
- b** Deductible meals and entertainment (see instructions)
- 25** Utilities
- 26** Wages (less employment credits)
- 27a** Other expenses (from line 48)
- b** Reserved for future use

8  
9  
10  
11  
12  
13  
14  
15  
16a  
16b  
17  
18  
19  
20a  
20b  
21  
22  
23  
24a  
24b  
25  
26  
27a  
27b

- 28** **Total expenses** before expenses for business use of home. Add lines 8 through 27a
- 29** Tentative profit or (loss). Subtract line 28 from line 7
- 30** Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).

**Simplified method filers only:** enter the total square footage of: (a) your home:

and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30

**31** **Net profit or (loss).** Subtract line 30 from line 29.

- If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.
- If a loss, you **must** go to line 32.

**32** If you have a loss, check the box that describes your investment in this activity (see instructions).

- If you checked 32a, enter the loss on both **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.
- If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11334P

Schedule C (Form 1040) 2013

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Schedule SE (Form 1040) 2013

Attachment Sequence No. **17**Page **2**

Name of person with self-employment income (as shown on Form 1040)

DAVID S TRAINA

Social security number of person  
with self-employment income ▶**Section B—Long Schedule SE****Part I Self-Employment Tax****Note.** If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

- A** If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I . . . . . ☐

<b>1a</b> Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. <b>Note.</b> Skip lines 1a and 1b if you use the farm optional method (see instructions)	<b>1a</b>	
<b>b</b> If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	<b>1b</b>	( )
<b>2</b> Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. <b>Note.</b> Skip this line if you use the nonfarm optional method (see instructions)	<b>2</b>	
<b>3</b> Combine lines 1a, 1b, and 2	<b>3</b>	
<b>4a</b> If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3. <b>Note.</b> If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	<b>4a</b>	
<b>b</b> If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	<b>4b</b>	
<b>c</b> Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax. <b>Exception.</b> If less than \$400 and you had church employee income, enter -0- and continue ▶	<b>4c</b>	
<b>5a</b> Enter your church employee income from Form W-2. See instructions for definition of church employee income	<b>5a</b>	
<b>b</b> Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	<b>5b</b>	
<b>6</b> Add lines 4c and 5b	<b>6</b>	
<b>7</b> Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2013	<b>7</b>	
<b>8a</b> Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$113,700 or more, skip lines 8b through 10, and go to line 11	<b>8a</b>	
<b>b</b> Unreported tips subject to social security tax (from Form 4137, line 10)	<b>8b</b>	
<b>c</b> Wages subject to social security tax (from Form 8919, line 10)	<b>8c</b>	
<b>d</b> Add lines 8a, 8b, and 8c	<b>8d</b>	
<b>9</b> Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 ▶	<b>9</b>	
<b>10</b> Multiply the smaller of line 6 or line 9 by 12.4% (.124)	<b>10</b>	
<b>11</b> Multiply line 6 by 2.9% (.029)	<b>11</b>	
<b>12</b> Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 56, or Form 1040NR, line 54	<b>12</b>	
<b>13</b> Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	<b>13</b>	

**Part II Optional Methods To Figure Net Earnings** (see instructions)**Farm Optional Method.** You may use this method only if (a) your gross farm income<sup>1</sup> was not more than \$6,960, or (b) your net farm profits<sup>2</sup> were less than \$5,024.

- 14** Maximum income for optional methods
- 15** Enter the smaller of: two-thirds ( $\frac{2}{3}$ ) of gross farm income<sup>1</sup> (not less than zero) or \$4,640. Also include this amount on line 4b above

**Nonfarm Optional Method.** You may use this method only if (a) your net nonfarm profits<sup>3</sup> were less than \$5,024 and also less than 72.189% of your gross nonfarm income,<sup>4</sup> and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution.** You may use this method no more than five times.

- 16** Subtract line 15 from line 14
- 17** Enter the smaller of: two-thirds ( $\frac{2}{3}$ ) of gross nonfarm income<sup>4</sup> (not less than zero) or the amount on line 16. Also include this amount on line 4b above

<sup>1</sup> From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.<sup>2</sup> From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A—minus the amount you would have entered on line 1b had you not used the optional method.<sup>3</sup> From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.<sup>4</sup> From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

Schedule SE (Form 1040) 2013

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**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2014**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)

► Information about Schedule C and its separate instructions is at [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)**Transportation****B** Enter code from instructions► **484110****C** Business name. If no separate business name, leave blank.**Traina Services, LLC****D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2014? If "No," see instructions for limit on losses . . . . ☒ Yes ☐ No**H** If you started or acquired this business during 2014, check here . . . . . ☐**I** Did you make any payments in 2014 that would require you to file Form(s) 1099? (see instructions) . . . . . ☒ Yes ☐ No**J** If "Yes," did you or will you file required Forms 1099? . . . . . ☒ Yes ☐ No**Part I Income**

- 1** Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . . ☐
- 2** Returns and allowances . . . . .
- 3** Subtract line 2 from line 1. . . . .
- 4** Cost of goods sold (from line 42) . . . . .
- 5** **Gross profit.** Subtract line 4 from line 3 . . . . .
- 6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .
- 7** **Gross income.** Add lines 5 and 6 . . . . .

**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.

- 8** Advertising . . . . . **8**
- 9** Car and truck expenses (see instructions) . . . . . **9**
- 10** Commissions and fees . . . . . **10**
- 11** Contract labor (see instructions) . . . . . **11**
- 12** Depletion . . . . . **12**
- 13** Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . . **13**
- 14** Employee benefit programs (other than on line 19) . . . . . **14**
- 15** Insurance (other than health) . . . . . **15**
- 16** Interest:
- a** Mortgage (paid to banks, etc.) . . . . . **16a**
- b** Other . . . . . **16b**
- 17** Legal and professional services . . . . . **17**
- 18** Office expense (see instructions) . . . . . **18**
- 19** Pension and profit-sharing plans . . . . . **19**
- 20** Rent or lease (see instructions):
- a** Vehicles, machinery, and equipment . . . . . **20a**
- b** Other business property . . . . . **20b**
- 21** Repairs and maintenance . . . . . **21**
- 22** Supplies (not included in Part III) . . . . . **22**
- 23** Taxes and licenses . . . . . **23**
- 24** Travel, meals, and entertainment:
- a** Travel . . . . . **24a**
- b** Deductible meals and entertainment (see instructions) . . . . . **24b**
- 25** Utilities . . . . . **25**
- 26** Wages (less employment credits) . . . . . **26**
- 27a** Other expenses (from line 48) . . . . . **27a**
- b** Reserved for future use . . . . . **27b**
- 28** **Total expenses** before expenses for business use of home. Add lines 8 through 27a . . . . . **28**
- 29** Tentative profit or (loss). Subtract line 28 from line 7 . . . . . **29**
- 30** Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).
- Simplified method filers only:** enter the total square footage of: (a) your home: \_\_\_\_\_ and (b) the part of your home used for business: \_\_\_\_\_. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . . **30**
- 31** **Net profit or (loss).** Subtract line 30 from line 29.
- If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.
  - If a loss, you **must** go to line 32.
- 32** If you have a loss, check the box that describes your investment in this activity (see instructions).
- If you checked 32a, enter the loss on both **Form 1040, line 12**, (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**
  - If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.

- 32a** ☐ All investment is at risk.
- 32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

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Schedule C (Form 1040) 2014

TRAINA000011



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Schedule C (Form 1040) 2014

David S Traina

Page 2

**Part III Cost of Goods Sold** (see instructions)

33 Method(s) used to value closing inventory:    a ☐ Cost                      b ☐ Lower of cost or market                      c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation . . . . . ☐ Yes      ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . . .	35	
36 Purchases less cost of items withdrawn for personal use . . . . .	36	
37 Cost of labor. Do not include any amounts paid to yourself . . . . .	37	
38 Materials and supplies . . . . .	38	
39 Other costs . . . . .	39	
40 Add lines 35 through 39 . . . . .	40	
41 Inventory at end of year . . . . .	41	
42 <b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4. . . . .	42	

**Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ► \_\_\_\_\_

44 Of the total number of miles you drove your vehicle during 2014, enter the number of miles you used your vehicle for:

a Business \_\_\_\_\_ b Commuting (see instructions) \_\_\_\_\_ c Other \_\_\_\_\_

45 Was your vehicle available for personal use during off-duty hours? . . . . . ☐ Yes      ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? . . . . . ☐ Yes      ☐ No

47a Do you have evidence to support your deduction? . . . . . ☐ Yes      ☐ No

b If "Yes," is the evidence written? . . . . . ☐ Yes      ☐ No

**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

Cell Phone

UGO/MFM Payroll Expense

48 **Total other expenses.** Enter here and on line 27a . . . . .

48

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**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2015**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)▶ Information about Schedule C and its separate instructions is at [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)**Transportation, Home Delivery****B** Enter code from instructions**484110****C** Business name. If no separate business name, leave blank.**Traina Services, LLC****D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ▶

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2015? If "No," see instructions for limit on losses . . . . . ☒ Yes ☐ No**H** If you started or acquired this business during 2015, check here . . . . . ☐**I** Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions) . . . . . ☒ Yes ☐ No**J** If "Yes," did you or will you file required Forms 1099? . . . . . ☒ Yes ☐ No**Part I** **Income****1** Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . . ☐**2** Returns and allowances . . . . .**3** Subtract line 2 from line 1. . . . .**4** Cost of goods sold (from line 42) . . . . .**5** Gross profit. Subtract line 4 from line 3 . . . . .**6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .**7** Gross income. Add lines 5 and 6 . . . . .**Part II** **Expenses.** Enter expenses for business use of your home **only** on line 30.**8** Advertising . . . . . **8****9** Car and truck expenses (see instructions) . . . . . **9****10** Commissions and fees . . . . . **10****11** Contract labor (see instructions) . . . . . **11****12** Depletion . . . . . **12****13** Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . . **13****14** Employee benefit programs (other than on line 19) . . . . . **14****15** Insurance (other than health) . . . . . **15****16** Interest:**a** Mortgage (paid to banks, etc.) . . . . . **16a****b** Other . . . . . **16b****17** Legal and professional services. . . . . **17****18** Office expense (see instructions) . . . . . **18****19** Pension and profit-sharing plans . . . . . **19****20** Rent or lease (see instructions):**a** Vehicles, machinery, and equipment . . . . . **20a****b** Other business property . . . . . **20b****21** Repairs and maintenance . . . . . **21****22** Supplies (not included in Part III) . . . . . **22****23** Taxes and licenses . . . . . **23****24** Travel, meals, and entertainment:**a** Travel . . . . . **24a****b** Deductible meals and entertainment (see instructions) . . . . . **24b****25** Utilities . . . . . **25****26** Wages (less employment credits). . . . . **26****27a** Other expenses (from line 48) . . . . . **27a****b** Reserved for future use . . . . . **27b****28** Total expenses before expenses for business use of home. Add lines 8 through 27a . . . . . **28****29** Tentative profit or (loss). Subtract line 28 from line 7 . . . . . **29****30** Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).**Simplified method filers only:** enter the total square footage of: (a) your home: \_\_\_\_\_  
and (b) the part of your home used for business: \_\_\_\_\_. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . . **30****31** Net profit or (loss). Subtract line 30 from line 29.

• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2.

(If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If a loss, you must go to line 32.

**32** If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions).

Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.



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Schedule C (Form 1040) 2015

David S Traina

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**Part III** Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4.	42	

**Part IV** Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ 01/01/2014

44 Of the total number of miles you drove your vehicle during 2015, enter the number of miles you used your vehicle for:

a Business ☐ b Commuting (see instructions) ☐ c Other ☐

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☒ No

46 Do you (or your spouse) have another vehicle available for personal use? ☒ Yes ☐ No

47a Do you have evidence to support your deduction? ☒ Yes ☐ No

b If "Yes," is the evidence written? ☒ Yes ☐ No

**Part V** Other Expenses. List below business expenses not included on lines 8-26 or line 30.

Cell Phone

UGO/MFM Payroll Expense

48 Total other expenses. Enter here and on line 27a

48

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TRAINA000014 Schedule C (Form 1040) 2015



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**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2016**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)

► Information about Schedule C and its separate instructions is at [www.irs.gov/schedulec](http://www.irs.gov/schedulec).  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

**Transportation, Home Delivery**

B Enter code from instructions

► **484110**

C Business name. If no separate business name, leave blank.

**Traina Services, LLC**

D Employer ID number (EIN), (see instr.)

E Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ►G Did you "materially participate" in the operation of this business during 2016? If "No," see instructions for limit on losses . . . . . ☒ Yes ☐ NoH If you started or acquired this business during 2016, check here . . . . . ☐I Did you make any payments in 2016 that would require you to file Form(s) 1099? (see instructions) . . . . . ☐ Yes ☒ NoJ If "Yes," did you or will you file required Forms 1099? . . . . . ☐ Yes ☐ No**Part I Income**1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . . ☐

2 Returns and allowances . . . . .

3 Subtract line 2 from line 1. . . . .

4 Cost of goods sold (from line 42) . . . . .

5 Gross profit. Subtract line 4 from line 3 . . . . .

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .

7 Gross income. Add lines 5 and 6 . . . . .

**Part II Expenses. Enter expenses for business use of your home only on line 30.**

8 Advertising . . . . .

9 Car and truck expenses (see instructions) . . . . .

10 Commissions and fees . . . . .

11 Contract labor (see instructions) . . . . .

12 Depletion . . . . .

13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .

14 Employee benefit programs

(other than on line 19) . . . . .

15 Insurance (other than health) . . . . .

16 Interest:

a Mortgage (paid to banks, etc.) . . . . .

b Other . . . . .

17 Legal and professional services. . . . .

18 Office expense (see instructions) . . . . .

19 Pension and profit-sharing plans . . . . .

20 Rent or lease (see instructions):

a Vehicles, machinery, and equipment . . . . .

b Other business property . . . . .

21 Repairs and maintenance . . . . .

22 Supplies (not included in Part III) . . . . .

23 Taxes and licenses . . . . .

24 Travel, meals, and entertainment:

a Travel . . . . .

b Deductible meals and

entertainment (see instructions) . . . . .

25 Utilities . . . . .

26 Wages (less employment credits). . . . .

27a Other expenses (from line 48) . . . . .

b Reserved for future use . . . . .

28 Total expenses before expenses for business use of home. Add lines 8 through 27a . . . . .

29 Tentative profit or (loss). Subtract line 28 from line 7 . . . . .

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).

**Simplified method filers only:** enter the total square footage of: (a) your home: \_\_\_\_\_

and (b) the part of your home used for business: \_\_\_\_\_ Use the Simplified Method

Worksheet in the instructions to figure the amount to enter on line 30 . . . . .

31 Net profit or (loss). Subtract line 30 from line 29.

• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2.  
 (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions).  
 Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

32a ☒ All investment is at risk.32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

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Schedule C (Form 1040) 2016

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04/14/2017 03:23:50PM



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Schedule C (Form 1040) 2016

David S Traina

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**Part III** Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation 35

36 Purchases less cost of items withdrawn for personal use. 36

37 Cost of labor. Do not include any amounts paid to yourself 37

38 Materials and supplies 38

39 Other costs 39

40 Add lines 35 through 39 40

41 Inventory at end of year 41

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4. 42

**Part IV** Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ►

44 Of the total number of miles you drove your vehicle during 2016, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

**Part V** Other Expenses. List below business expenses not included on lines 8-26 or line 30.

Cell Phone

UGO/MFM Payroll Expense

Claims

48 Total other expenses. Enter here and on line 27a

48

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TRAINA000016 Schedule C (Form 1040) 2016



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**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2017**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)

► Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)**Transportation, Home Delivery****B** Enter code from instructions► **484110****C** Business name. If no separate business name, leave blank.**Traina Services, LLC****D** Employer ID number (EIN), (see instr.)**E** Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2017? If "No," see instructions for limit on losses . . . . . ☒ Yes ☐ No**H** If you started or acquired this business during 2017, check here . . . . . ☐ Yes ☒ No**I** Did you make any payments in 2017 that would require you to file Form(s) 1099? (see instructions) . . . . . ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? . . . . . ☐ Yes ☒ No**Part I Income**

<b>1</b> Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . .	<input type="checkbox"/>	<b>1</b>	
<b>2</b> Returns and allowances . . . . .		<b>2</b>	
<b>3</b> Subtract line 2 from line 1. . . . .		<b>3</b>	
<b>4</b> Cost of goods sold (from line 42) . . . . .		<b>4</b>	
<b>5</b> Gross profit. Subtract line 4 from line 3 . . . . .		<b>5</b>	
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .		<b>6</b>	
<b>7</b> Gross income. Add lines 5 and 6 . . . . .		<b>7</b>	

**Part II Expenses. Enter expenses for business use of your home only on line 30.**

<b>8</b> Advertising . . . . .	<b>8</b>		<b>18</b> Office expense (see instructions) . . . . .	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions) . . . . .	<b>9</b>		<b>19</b> Pension and profit-sharing plans . . . . .	<b>19</b>	
<b>10</b> Commissions and fees . . . . .	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions) . . . . .	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment . . . . .	<b>20a</b>	
<b>12</b> Depletion . . . . .	<b>12</b>		<b>b</b> Other business property . . . . .	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .	<b>13</b>		<b>21</b> Repairs and maintenance . . . . .	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19) . . . . .	<b>14</b>		<b>22</b> Supplies (not included in Part III) . . . . .	<b>22</b>	
<b>15</b> Insurance (other than health) . . . . .	<b>15</b>		<b>23</b> Taxes and licenses . . . . .	<b>23</b>	
<b>16</b> Interest:			<b>24</b> Travel, meals, and entertainment:		
<b>a</b> Mortgage (paid to banks, etc.) . . . . .	<b>16a</b>		<b>a</b> Travel . . . . .	<b>24a</b>	
<b>b</b> Other . . . . .	<b>16b</b>		<b>b</b> Deductible meals and entertainment (see instructions) . . . . .	<b>24b</b>	
<b>17</b> Legal and professional services . . . . .	<b>17</b>		<b>25</b> Utilities . . . . .	<b>25</b>	
<b>28</b> Total expenses before expenses for business use of home. Add lines 8 through 27a . . . . .	<b>28</b>		<b>26</b> Wages (less employment credits) . . . . .	<b>26</b>	
<b>29</b> Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	<b>29</b>		<b>27a</b> Other expenses (from line 48) . . . . .	<b>27a</b>	
<b>30</b> Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: <b>2000</b> and (b) the part of your home used for business: <b>100</b> . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . .	<b>30</b>		<b>b</b> Reserved for future use . . . . .	<b>27b</b>	
<b>31</b> Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	<b>31</b>				
<b>32</b> If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12, (or Form 1040NR, line 13) and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			<b>32a</b> <input checked="" type="checkbox"/> All investment is at risk.		
			<b>32b</b> <input type="checkbox"/> Some investment is not at risk.		

For Paperwork Reduction Act Notice, see the separate instructions.

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Schedule C (Form 1040) 2017

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04/17/2018 11:30:30PM



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Schedule C (Form 1040) 2017

David S Traina

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**Part III Cost of Goods Sold** (see instructions)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. ☐ Yes ☐ No

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation 35

36 Purchases less cost of items withdrawn for personal use. 36

37 Cost of labor. Do not include any amounts paid to yourself 37

38 Materials and supplies 38

39 Other costs 39

40 Add lines 35 through 39 40

41 Inventory at end of year 41

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4. 42

**Part IV Information on Your Vehicle.** Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ►

44 Of the total number of miles you drove your vehicle during 2017, enter the number of miles you used your vehicle for:

a Business b Commuting (see instructions) c Other

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

Cell Phone

UGO/MFM Payroll Expense

Employee Qualification Fees

Workers Compensation

48 Total other expenses. Enter here and on line 27a

48

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TRAINA000018 Schedule C (Form 1040) 2017



**SCHEDULE C**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2018**Attachment  
Sequence No. **09**

► Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.  
 ► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)**Transportation, Home Delivery****B** Enter code from instructions► **484110****C** Business name. If no separate business name, leave blank.**Traina Services, LLC****D** Employer ID number (EIN) (see instr.)**47-1132199****E** Business address (including suite or room no.) ►

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ►**G** Did you "materially participate" in the operation of this business during 2018? If "No," see instructions for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2018, check here ☐**I** Did you make any payments in 2018 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No**Part I Income**

<b>1</b> Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	<b>1</b>	
<b>2</b> Returns and allowances	<b>2</b>	
<b>3</b> Subtract line 2 from line 1	<b>3</b>	
<b>4</b> Cost of goods sold (from line 42)	<b>4</b>	
<b>5</b> Gross profit. Subtract line 4 from line 3	<b>5</b>	
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).	<b>6</b>	
<b>7</b> Gross income. Add lines 5 and 6	<b>7</b>	

**Part II Expenses.** Enter expenses for business use of your home only on line 30.

<b>8</b> Advertising	<b>8</b>		<b>18</b> Office expense (see instructions).	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions)	<b>9</b>		<b>19</b> Pension and profit-sharing plans	<b>19</b>	
<b>10</b> Commissions and fees	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion	<b>12</b>		<b>b</b> Other business property	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>		<b>21</b> Repairs and maintenance	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19)	<b>14</b>		<b>22</b> Supplies (not included in Part III)	<b>22</b>	
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses	<b>23</b>	
<b>16</b> Interest (see instructions):			<b>24</b> Travel and meals:		
<b>a</b> Mortgage (paid to banks, etc.)	<b>16a</b>		<b>a</b> Travel	<b>24a</b>	
<b>b</b> Other	<b>16b</b>		<b>b</b> Deductible meals (see instructions)	<b>24b</b>	
<b>17</b> Legal and professional services	<b>17</b>		<b>25</b> Utilities	<b>25</b>	
			<b>26</b> Wages (less employment credits)	<b>26</b>	
			<b>27a</b> Other expenses (from line 48)	<b>27a</b>	
			<b>b</b> Reserved for future use	<b>27b</b>	

**28** Total expenses before expenses for business use of home. Add lines 8 through 27a**29** Tentative profit or (loss). Subtract line 28 from line 7**30** Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).**Simplified method filers only:** enter the total square footage of: (a) your home: \_\_\_\_\_

and (b) the part of your home used for business: \_\_\_\_\_. Use the Simplified Method

Worksheet in the instructions to figure the amount to enter on line 30

**31** Net profit or (loss). Subtract line 30 from line 29.

• If a profit, enter on both **Schedule 1 (Form 1040), line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**.  
 (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you must go to line 32.

**32** If you have a loss, check the box that describes your investment in this activity (see instructions).

• If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions).  
 Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

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05/07/2019 03:51:30PM

Schedule C (Form 1040) 2018

TRAINA000019



**Part III Cost of Goods Sold** (see instructions)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory?			
	If "Yes," attach explanation <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		

**Part IV Information on Your Vehicle.** Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year)	► 01/01/2018
44	Of the total number of miles you drove your vehicle during 2018, enter the number of miles you used your vehicle for:	
a	Business	b Commuting (see instructions)
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
47a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

Cell Phone	
UGO/MFM Payroll Expense	
Employee Qualification Fees	
Workers Compensation	
Bank Fees	
48 Total other expenses. Enter here and on line 27a	48



**SCHEDULE C**  
(Form 1040 or 1040-SR)**Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2019**Attachment  
Sequence No. **09**Department of the Treasury  
Internal Revenue Service (99)▶ Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor

**David S Traina**

Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions)**Transportation, Home Delivery****B** Enter code from instructions▶ **484110****C** Business name. If no separate business name, leave blank.**Traina Services, LLC****D** Employer ID number (EIN) (see instr.)**47-1132199****E** Business address (including suite or room no.) ▶

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) ▶**G** Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses ☒ Yes ☐ No**H** If you started or acquired this business during 2019, check here ☐**I** Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No**J** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No**Part I Income****1** Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐**2** Returns and allowances**3** Subtract line 2 from line 1**4** Cost of goods sold (from line 42)**5** Gross profit. Subtract line 4 from line 3**6** Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).**7** Gross income. Add lines 5 and 6**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.**8** Advertising**9** Car and truck expenses (see instructions)**10** Commissions and fees**11** Contract labor (see instructions)**12** Depletion**13** Depreciation and section 179 expense deduction (not included in Part III) (see instructions)**14** Employee benefit programs (other than on line 19)**15** Insurance (other than health)**16** Interest (see instructions):**a** Mortgage (paid to banks, etc.)**b** Other**17** Legal and professional services**18** Office expense (see instructions).**19** Pension and profit-sharing plans**20** Rent or lease (see instructions):**a** Vehicles, machinery, and equipment**b** Other business property**21** Repairs and maintenance**22** Supplies (not included in Part III)**23** Taxes and licenses**24** Travel and meals:**a** Travel**b** Deductible meals (see instructions)**25** Utilities**26** Wages (less employment credits)**27a** Other expenses (from line 48)**b** Reserved for future use**28** Total expenses before expenses for business use of home. Add lines 8 through 27a**29** Tentative profit or (loss). Subtract line 28 from line 7**30** Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions).**Simplified method filers only:** enter the total square footage of: (a) your home:

and (b) the part of your home used for business: Use the Simplified Method

Worksheet in the instructions to figure the amount to enter on line 30

**31** Net profit or (loss). Subtract line 30 from line 29.• If a profit, enter on both **Schedule 1 (Form 1040 or 1040-SR), line 3** (or **Form 1040-NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.• If a loss, you **must** go to line 32.**32** If you have a loss, check the box that describes your investment in this activity (see instructions).• If you checked 32a, enter the loss on both **Schedule 1 (Form 1040 or 1040-SR), line 3** (or **Form 1040-NR, line 13**) and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.• If you checked 32b, you **must** attach **Form 6198**. Your loss may be limited.**32a** ☒ All investment is at risk.**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040 or 1040-SR) 2019

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10/07/2020 09:20:19AM

TRAINA000021



**Part III Cost of Goods Sold** (see instructions)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation. . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . . .	35		
36	Purchases less cost of items withdrawn for personal use. . . . .	36		
37	Cost of labor. Do not include any amounts paid to yourself . . . . .	37		
38	Materials and supplies . . . . .	38		
39	Other costs . . . . .	39		
40	Add lines 35 through 39 . . . . .	40		
41	Inventory at end of year . . . . .	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 . . . . .	42		

**Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶ <u>01/01/2018</u>
44	Of the total number of miles you drove your vehicle during 2019, enter the number of miles you used your vehicle for:
a	Business <u>                    </u> b Commuting (see instructions <u>                    </u> c Other <u>                    </u>
45	Was your vehicle available for personal use during off-duty hours? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No
47a	Do you have evidence to support your deduction? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No

**Part V Other Expenses.** List below business expenses not included on lines 8-26 or line 30.

Cell Phone	
UGO/MFM Payroll Expense	
Employee Qualification Fees	
Workers Compensation	
Bank Fees	
48 Total other expenses. Enter here and on line 27a . . . . .	48

# **EXHIBIT 3**



**UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF NEW YORK**

MIKE KLOPPEL and ADAM WILSON, on behalf  
of themselves and all other similarly situated  
persons,

Plaintiffs,

v.

SEARS HOLDINGS CORPORATION, SEARS,  
ROEBUCK & COMPANY, and  
HOMEDELIVERYLINK, INC.,

Defendants.

Civil No. 6:17-cv-06296-FPG-JWF

**PLAINTIFF ADAM WILSON'S OBJECTIONS & ANSWERS  
TO DEFENDANT HDL'S FIRST SET OF INTERROGATORIES**

**TO:** Andrew J. Butcher, Esq.  
Chip Andrewsavage, Esq.  
SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C.  
30 W. Monroe Street, Suite 600  
Chicago, Illinois 60603  
*Attorneys for Defendant HomeDeliveryLink, Inc.*

**PLEASE TAKE NOTICE** that pursuant to Federal Rules of Civil Procedure 26 and 33, as well as Local Rule 26, Plaintiff Adam Wilson (hereinafter "Plaintiff") by and through his undersigned counsel, hereby objects to and answers Defendant HomeDeliveryLink, Inc.'s (hereinafter "Defendant" or "HDL") First Set of Interrogatories to Plaintiff Adam Wilson (the "Interrogatories") as follows:

**GENERAL OBJECTIONS**

1. Plaintiff objects to Defendant's Interrogatories to the extent they purport to impose obligations on Plaintiff inconsistent with or in excess of Plaintiff's obligations under the Federal Rules of Civil Procedure.

2. Plaintiff objects to Defendant's Interrogatories to the extent they purport to call for information beyond Plaintiff's possession, custody or control and to the extent they seek information and/or documents that are publicly available. Plaintiff's answers are based on information known to him and not on information within the possession, custody or control of any other individual, party, or entity.

3. Plaintiff objects to Defendant's Interrogatories to the extent they seek the production of information protected by the attorney-client privilege, work product doctrine, or any other privilege or doctrine of immunity from discovery. Nothing contained in Plaintiff's answers to these Interrogatories is intended to be or should be considered a waiver of any attorney-client privilege, the protection afforded by the work product doctrine, or any other applicable privilege or doctrine of immunity from discovery.

4. Plaintiff objects to Defendant's Interrogatories to the extent that the discovery sought is overly broad, unduly burdensome, unreasonably cumulative or duplicative, or is obtainable from a more convenient, less burdensome or expensive source.

5. Plaintiff objects to Defendant's Interrogatories to the extent that they would require him to conduct research and investigations, or to acquire information not presently within his personal knowledge, possession, custody or control, and to which Defendant would be in a more reasonably suited position to investigate, compile or evaluate such information.

6. Plaintiff objects to Defendant's Interrogatories to the extent that they are not proportional to the needs of the case considering the importance of the issues at stake in the action, the amount in controversy, the parties' relative access to relevant information, the parties' resources, the importance of the discovery in resolving the issues, and whether the burden or expense of the proposed discovery outweighs its likely benefit.

7. Plaintiff objects to the Interrogatories to the extent that they seek information which is outside the permissible scope of discovery in this action, is not relevant to the subject matter of this action and/or is not reasonably calculated to lead to the discovery of admissible evidence in this action.

8. Plaintiff objects to Defendant's Interrogatories to the extent that they seek information which would require Plaintiff to take action beyond a reasonable search for documents/or information maintained in Plaintiff's possession, custody or control.

9. Plaintiff objects to Defendant's Interrogatories to the extent that they are premature.

10. Plaintiff objects to Defendant's Interrogatories insofar as they seek to limit Plaintiff's ability to rely on and/or present at any hearing or trial in this matter, additional documents or information. Discovery is ongoing and Plaintiff reserves the right to supplement and/or amend any and all of his responses until the time of trial in this matter.

11. The answer to any Interrogatory, including but not limited to a request for documents related to the Interrogatory answer, does not constitute an admission by Plaintiff that such document or the information contained therein, is either relevant, material, admissible in evidence, or reasonably calculated to lead to the discovery of admissible evidence in this litigation. By responding to these Interrogatories, Plaintiff does not concede that he is in the possession of any document responsive to any particular request.



12. Plaintiff objects to any Interrogatory that is ambiguous, vexatious or confusing and therefore not susceptible to clear and definitive response.

13. Plaintiff objects to these Interrogatories to the extent they seek discovery duplicative of that which is requested in Defendant's other discovery requests.

14. Plaintiff objects to these Interrogatories to the extent that they contain definitions of certain terms that are distinct from and contrary to the identical terms defined in L.Civ.R. 26(c)(3)(A)-(G).

The General Objections, set forth above, are incorporated in each of the following answers to the specific Interrogatories of Defendant HDL as if fully set forth therein. The restatement or rephrasing of any of the foregoing objections within any of the following answers shall not limit the scope of the foregoing objections anywhere in these answers. Plaintiff reserves the right to amend these answers to Interrogatories pending further investigation and discovery in this matter. Subject to all of the foregoing general and particular objections, Plaintiff responds to Defendant's Interrogatories as follows:

**SPECIFIC OBJECTIONS & ANSWERS  
TO DEFENDANT HDL's FIRST SET OF INTERROGATORIES**

1. For each work week in which you contend HDL subjected you to improper deductions, charges and/or expenses that were not incurred for your benefits as alleged in the Complaint, identify: (1) the dates of the work week, (2) the amount of the improper deductions, charges and/or expenses, (3) the amount you were paid, and (4) the amount you claim you are owed.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is oppressive, overly broad, unduly burdensome and not reasonable in scope. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' "improper deductions, charges and/or expenses". The Interrogatory is therefore based upon a faulty premise. Defendants, *and not Plaintiff*, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped WILSON 000001 through WILSON 000316 for discovery purposes. However, these documents are not believed to comprise a complete set of documents responsive to this Interrogatory and Plaintiff therefore expressly reserves the right to continue searching for more responsive documents and amending and/or supplementing this answer.

2. For each work week in which you contend HDL subjected you to illegal kickback of wages by deducting from your checks for any alleged damage or problem with any delivery, as well as to deductions for insurance, uniforms, and truck lease payments, among other deductions as alleged in the Complaint, identify: (1) the dates of the work week, (2) the amount of the illegal kickbacks and/or deductions, (3) the amount you were paid, and (4) the amount you claim you are owed.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is oppressive, overly broad, unduly burdensome and not reasonable in scope. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' illegal deductions. The Interrogatory is therefore based upon a faulty premise. Defendants, *and not Plaintiff*, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped WILSON 000001 through WILSON 000316 for discovery purposes. However, these documents are not believed to comprise a complete set of documents responsive to this Interrogatory and Plaintiff therefore expressly reserves the right to continue searching for more responsive documents and amending and/or supplementing this answer.

3. Identify what orientation or training, if any, you received from HDL or other drivers who contracted with HDL.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is vague and confusing as the terms “orientation” and “training” are not defined and therefore this Interrogatory susceptible to ambiguous, differing or unclear answers.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Each morning Plaintiff and the putative class members (collectively the “drivers”) were required to attend a meeting conducted by representatives of both HDL and Sears (hereinafter collectively “Defendants’ Representatives”). The Defendants’ Representatives would instruct the drivers on how they should assemble merchandise, how they should load their trucks and how they should properly interact with customers. Occasionally, the Defendants’ Representatives would show the drivers videos for instructional purposes.

4. If you contend that any aspect of your relationship with HDL was not covered or governed by the Independent Contract Agreement you signed with HDL, please describe those aspects and, if you contend a provision of the Independent Contractor Agreement is unenforceable, please explain the basis for your contention.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to elicit legal conclusions from a lay Plaintiff. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to interpret legal documents and engage in legal analysis. Further objection on the ground that this Interrogatory improperly seeks to elicit information that may not be within Plaintiff’s personal knowledge. See F.R.E. 602.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Provisions 5, 6, 7, 8, 9 and 11 of the Independent Contractor Agreement (the “ICA”) all violate N.Y. LAB. Law §§ 193 and 198-b because they impose what amounts to



unlawful deductions from Plaintiff's wages and/or require illegal "kick-backs" from Plaintiff's lawful wages.

Provision 10 violates N.Y. LAB. Law §§ 190(2) and 862-b because Plaintiff performed labor, work and services for the Defendants both factually and legally as an "employee" but was unlawfully misclassified as an "independent contractor".

Provision 16 is not enforceable because it is not reasonable. The Provision is not necessary to protect HDL or Sears' legitimate business interests and it seeks to cause financial undue hardship on the Plaintiff.

Provision 17 is unenforceable pursuant to Section 1 of the Federal Arbitration Act and the Supreme Court precedent of New Prime Inc. v. Oliveira, 139 S.Ct. 532 (2019).

Provision 20 is contrary to public policy and the remedial nature of New York's labor laws.

5. During the time you contracted with HDL, did you contract with or were you also employed by any other business entity or individuals? If so, list the applicable business entity or individuals' names, addresses and dates of contract or employment.

**OBJECTIONS:** See all General Objections.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** No.

6. Identify each and every person who assisted you and/or ECC Movers in providing services for HDL, including his or her dates of service, whether you hired him or her, and the amount of compensation that you and/or ECC Movers paid to him or her.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is vague and confusing as the phrase "assisted ... in providing services for HDL" is not defined and therefore this Interrogatory is susceptible to an ambiguous, differing or unclear answer.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff worked with Luke Winagle and Mike Rex of HDL; Bob Ferguson and Ken Tompowski of Sears; and Michael Thurston, William Rager, Nick Thurston, Dillon Schmelzinger and Aaron Jenneve of ECC Movers, LLC.

7. If you ever obtained for-hire motor carrier operating authority from the Federal Motor Carrier Safety Administration for you or any entity controlled by you, state the date on which you applied for the authority, the name of the person or entity on whose behalf you applied for the authority, and whether the authority was granted.

**OBJECTIONS:** See all General Objections. Further objections that this Interrogatory seeks information of no relevance to this action, is not probative of any issue in dispute and is not reasonably calculated to lead the discovery of admissible evidence.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Motor Property Common Carrier authority was granted for ECC Movers LLC on May 15, 2014.

8. Identify the number of vehicles you owned, leased, rented, or operated in the course of performing services for HDL, including the make, model, year, and beginning and ending dates of your ownership, lease, rental, or operation of the vehicle.

**OBJECTIONS:** See all General Objections. Further objections that this Interrogatory seeks information of no relevance to this action, is not probative of any issue in dispute and is not reasonably calculated to lead the discovery of admissible evidence.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff rented between five (5) to seven (7) International 4300s from Enterprise Holdings, Inc. while performing services for HDL.

9. Identify each and every document evidencing the kickback(s), deduction(s), charge(s), or expense(s) identified in response to Interrogatory Nos. 1 and/or 2, including any written authorizations that you signed for the deductions, charges, or expenses.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify documents which support legal conclusions of which he may not have personal knowledge of. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' improper kickbacks, deductions, charges and/or expenses. The Interrogatory is therefore based upon a faulty premise. Defendants, and not Plaintiff, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*



**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped WILSON 000001 through WILSON 000316 for discovery purposes. Plaintiff did not authorize any of the deductions, charges or expenses he is claiming as compensable damages for in this action. Moreover, these documents are not believed to comprise a complete set of documents responsive to this Interrogatory and Plaintiff therefore expressly reserves the right to continue searching for more responsive documents and amending and/or supplementing this answer.

10. The facts supporting your contention in the Complaint that you were misclassified as an independent contractor of HDL.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify facts which support a legal conclusion of which he may not have personal knowledge of.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Sears and HDL exhibited a high degree of direction and control over the means and manner in which Plaintiff performed his delivery services for the Defendants; Plaintiff did not own or lease the goods he delivered for Defendants and he was not entitled to the "profits" derived from those deliveries; Plaintiff was expected to exclusively provide delivery services for HDL and Sears; Sears and HDL required Plaintiff to dress in specific clothing that gave customers the clear impression he was a Sears employee; Plaintiff was required to perform his delivery services in conformance with HDL and Sears' procedures, practices and requirements; in performing his delivery services, Plaintiff's vehicles and equipment were required to display signs, placards or other identification devices to identify that the vehicle or equipment was operated on behalf of Defendants; Plaintiff was not permitted to freely provide delivery services for companies other than HDL and Sears. Plaintiff also refers HDL to Paragraphs 11 through 30 of Plaintiffs' First Amended Class Action Complaint for additional facts responsive to this Interrogatory.

11. The facts supporting your contention in the complaint that HDL subjected you to improper deductions, charges, and/or expenses.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify facts which support a legal conclusion of which he may not have personal knowledge of.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff refers HDL to Paragraphs 31 through 34 and 45 to 46 of Plaintiffs' First Amended Class Action Complaint for identification of the "facts" responsive to this



Interrogatory. As documentary support for these “facts”, pursuant to Fed. R. Civ. P. 33(d), Plaintiff also answers that HDL can determine a more specific answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped WILSON 000001 through WILSON 000316 for discovery purposes.

**FED. R. CIV. P. 26(g)(1)(A) SIGNATURE**

I, Ravi Sattiraju, Esq., attorney for Plaintiff Adam Wilson, hereby certify that to the best of my knowledge, information and belief, formed after a reasonable inquiry, the above answers to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Adam Wilson are complete and correct as of the time they have been made.

**THE SATTIRAJU LAW FIRM, P.C.**

*Attorneys for Plaintiffs, on behalf of themselves  
and all other similarly situated persons*

Date: April 15, 2019  
Princeton, New Jersey

BY: /s/ Ravi Sattiraju  
RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com

**FED. R. CIV. P. 26(g)(1)(B) SIGNATURE**

I, Ravi Sattiraju, Esq., attorney for Plaintiff Adam Wilson, hereby certify that to the best of my knowledge, information and belief, formed after a reasonable inquiry and review of applicable case law, each objection I interposed above to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Adam Wilson, is:

- (i) consistent with the Federal Rules of Civil Procedure and warranted by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law, or for establishing new law;
- (ii) not interposed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; and
- (iii) neither unreasonable nor ~~unduly burdensome or expensive~~, considering the needs of the case, prior discovery in the case, the amount in controversy, and the importance of the issues at stake in the action.

**THE SATTIRAJU LAW FIRM, P.C.**

*Attorneys for Plaintiffs, on behalf of themselves  
and all other similarly situated persons*

Date: April 15, 2019  
Princeton, New Jersey

BY: /s/ **Ravi Sattiraju**  
RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com



**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that a true and accurate copy of the foregoing Plaintiff's Objections and Answers to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Adam Wilson was served on this, the 15th day of April 2019, upon the following counsel of record for the Defendants:

<b>For Defendant HDL:</b>	<b>For Defendant Sears</b>
Andrew J. Butcher, Esq. (Admitted <i>Pro Hac Vice</i> ) SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C. 30 W. Monroe Street, Suite 600 Chicago, Illinois 60603 (Via Regular and Electronic Mail; and	Brendan T. Killeen, Esq. MORGAN, LEWIS & BOCKIUS, LLP 101 Park Avenue New York, New York 10178 (Via Electronic Mail Only); and
Chip Andrewsavage, Esq. (Admitted <i>Pro Hac Vice</i> ) SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C. 30 W. Monroe Street, Suite 600 Chicago, Illinois 60603 (Via Electronic Mail Only); and	Michael J. Puma, Esq. MORGAN, LEWIS & BOCKIUS, LLP 1701 Market Street Philadelphia, Pennsylvania 19103 (Via Electronic Mail Only).
Rodney O. Personius, Esq. PERSONIUS MELBER LLP 2100 Main Place Tower Buffalo, New York 14202 (Via Electronic Mail Only).	

Date: April 15, 2019  
Princeton, New Jersey

**s/ Ravi Sattiraju**

RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com

# **EXHIBIT 4**

**UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF NEW YORK**

MIKE KLOPPEL and ADAM WILSON, on behalf  
of themselves and all other similarly situated  
persons,

Plaintiffs,

v.

SEARS HOLDINGS CORPORATION, SEARS,  
ROEBUCK & COMPANY, and  
HOMEDELIVERYLINK, INC.,

Defendants.

Civil No. 6:17-cv-06296-FPG-JWF

**PLAINTIFF MIKE KLOPPEL'S OBJECTIONS & ANSWERS  
TO DEFENDANT HDL'S FIRST SET OF INTERROGATORIES**

**TO:** Andrew J. Butcher, Esq.  
Chip Andrewsavage, Esq.  
SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C.  
30 W. Monroe Street, Suite 600  
Chicago, Illinois 60603  
*Attorneys for Defendant HomeDeliveryLink, Inc.*

**PLEASE TAKE NOTICE** that pursuant to Federal Rules of Civil Procedure 26 and 33, as well as Local Rule 26, Plaintiff Mike Kloppel (hereinafter "Plaintiff") by and through his undersigned counsel, hereby objects to and answers Defendant HomeDeliveryLink, Inc.'s (hereinafter "Defendant" or "HDL") First Set of Interrogatories to Plaintiff Mike Kloppel (the "Interrogatories") as follows:



**GENERAL OBJECTIONS**

1. Plaintiff objects to Defendant's Interrogatories to the extent they purport to impose obligations on Plaintiff inconsistent with or in excess of Plaintiff's obligations under the Federal Rules of Civil Procedure.

2. Plaintiff objects to Defendant's Interrogatories to the extent they purport to call for information beyond Plaintiff's possession, custody or control and to the extent they seek information and/or documents that are publicly available. Plaintiff's answers are based on information known to him and not on information within the possession, custody or control of any other individual, party, or entity.

3. Plaintiff objects to Defendant's Interrogatories to the extent they seek the production of information protected by the attorney-client privilege, work product doctrine, or any other privilege or doctrine of immunity from discovery. Nothing contained in Plaintiff's answers to these Interrogatories is intended to be or should be considered a waiver of any attorney-client privilege, the protection afforded by the work product doctrine, or any other applicable privilege or doctrine of immunity from discovery.

4. Plaintiff objects to Defendant's Interrogatories to the extent that the discovery sought is overly broad, unduly burdensome, unreasonably cumulative or duplicative, or is obtainable from a more convenient, less burdensome or expensive source.

5. Plaintiff objects to Defendant's Interrogatories to the extent that they would require him to conduct research and investigations, or to acquire information not presently within his personal knowledge, possession, custody or control, and to which Defendant would be in a more reasonably suited position to investigate, compile or evaluate such information.

6. Plaintiff objects to Defendant's Interrogatories to the extent that they are not proportional to the needs of the case considering the importance of the issues at stake in the action, the amount in controversy, the parties' relative access to relevant information, the parties' resources, the importance of the discovery in resolving the issues, and whether the burden or expense of the proposed discovery outweighs its likely benefit.

7. Plaintiff objects to the Interrogatories to the extent that they seek information which is outside the permissible scope of discovery in this action, is not relevant to the subject matter of this action and/or is not reasonably calculated to lead to the discovery of admissible evidence in this action.

8. Plaintiff objects to Defendant's Interrogatories to the extent that they seek information which would require Plaintiff to take action beyond a reasonable search for documents/or information maintained in Plaintiff's possession, custody or control.

9. Plaintiff objects to Defendant's Interrogatories to the extent that they are premature.

10. Plaintiff objects to Defendant's Interrogatories insofar as they seek to limit Plaintiff's ability to rely on and/or present at any hearing or trial in this matter, additional documents or information. Discovery is ongoing and Plaintiff reserves the right to supplement and/or amend any and all of his responses until the time of trial in this matter.

11. The answer to any Interrogatory, including but not limited to a request for documents related to the Interrogatory answer, does not constitute an admission by Plaintiff that such document or the information contained therein, is either relevant, material, admissible in evidence, or reasonably calculated to lead to the discovery of admissible evidence in this litigation. By responding to these Interrogatories, Plaintiff does not concede that he is in the possession of any document responsive to any particular request.

12. Plaintiff objects to any Interrogatory that is ambiguous, vexatious or confusing and therefore not susceptible to clear and definitive response.

13. Plaintiff objects to these Interrogatories to the extent they seek discovery duplicative of that which is requested in Defendant's other discovery requests.

14. Plaintiff objects to these Interrogatories to the extent that they contain definitions of certain terms that are distinct from and contrary to the identical terms defined in L.Civ.R. 26(c)(3)(A)-(G).

The General Objections, set forth above, are incorporated in each of the following answers to the specific Interrogatories of Defendant HDL as if fully set forth therein. The restatement or rephrasing of any of the foregoing objections within any of the following answers shall not limit the scope of the foregoing objections anywhere in these answers. Plaintiff reserves the right to amend these answers to Interrogatories pending further investigation and discovery in this matter. Subject to all of the foregoing general and particular objections, Plaintiff responds to Defendant's Interrogatories as follows:



**SPECIFIC OBJECTIONS & ANSWERS  
TO DEFENDANT HDL's FIRST SET OF INTERROGATORIES**

1. For each work week in which you contend HDL subjected you to improper deductions, charges and/or expenses that were not incurred for your benefits as alleged in the Complaint, identify: (1) the dates of the work week, (2) the amount of the improper deductions, charges and/or expenses, (3) the amount you were paid, and (4) the amount you claim you are owed.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is oppressive, overly broad, unduly burdensome and not reasonable in scope. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' "improper deductions, charges and/or expenses". The Interrogatory is therefore based upon a faulty premise. Defendants, *and not Plaintiff*, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped KLOPPEL 000001 through KLOPPEL 000419 for discovery purposes.

2. For each work week in which you contend HDL subjected you to illegal kickback of wages by deducting from your checks for any alleged damage or problem with any delivery, as well as to deductions for insurance, uniforms, and truck lease payments, among other deductions as alleged in the Complaint, identify: (1) the dates of the work week, (2) the amount of the illegal kickbacks and/or deductions, (3) the amount you were paid, and (4) the amount you claim you are owed.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is oppressive, overly broad, unduly burdensome and not reasonable in scope. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' illegal deductions. The Interrogatory is therefore based upon a faulty premise. Defendants, *and not Plaintiff*, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped KLOPPEL 000001 through KLOPPEL 000419 for discovery purposes.

3. Identify what orientation or training, if any, you received from HDL or other drivers who contracted with HDL.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is vague and confusing as the terms “orientation” and “training” are not defined and therefore this Interrogatory is susceptible to an ambiguous, differing or unclear answer.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** On a daily basis Plaintiff and the putative class members (collectively the “drivers”) were required to stop their activities and congregate to be addressed by representatives of both HDL and Sears (hereinafter collectively “Defendants’ Representatives”). These meetings were held at or around 7:00 am every day. During the meetings, there were discussions about scores customers gave the drivers’ delivery teams, issues the Defendants’ Representatives determined were problems (such as water lines, shut off valves or other requirements they set for delivery) and then the Defendants’ Representatives would tell the drivers how they should properly interact with the customer and how they should sell the required customer surveys to the customer.

The Defendants’ Representatives would also ask the drivers to repeat how they were to interact with the customers and how delivery items are to be installed according to Sears and HDL’s standards. The Defendants’ Representatives would show the drivers how to use equipment such as team straps, dollies or floor protection. Occasionally, the Defendants’ Representatives would show the drivers videos for instructional purposes.

All work had to be halted for these meetings. The drivers were required to listen and interact with the Defendants’ Representatives on company policy and rule changes. Uniform checks were also conducted by the Defendants’ Representatives. Those drivers not in uniform would be immediately reprimanded or told that their lack of compliance with this Sears policy would potentially result in loss of work.

In addition, Sears would occasionally send over its own manager(s) from the Buffalo terminal who would talk to the drivers about policies, watch as the drivers loaded trucks and comment on the drivers’ techniques or reprimand them for doing something the manager(s) did not like. After the drivers left for their deliveries, the Sears manager(s) and other Sears employees would perform a “follow along” (i.e. the Sears employees would shadow or ghost the drivers and w then randomly show up to critique the drivers’ delivery techniques.



**Failure to abide by Defendants' requirements and failure to attend these daily meetings would lead to loss of work for the drivers.**

4. If you contend that any aspect of your relationship with HDL was not covered or governed by the Independent Contract Agreement you signed with HDL, please describe those aspects and, if you contend a provision of the Independent Contractor Agreement is unenforceable, please explain the basis for your contention.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to elicit legal conclusions from a lay Plaintiff. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to interpret legal documents and engage in legal analysis. Further objection on the ground that this Interrogatory improperly seeks to elicit information that may not be within Plaintiff's personal knowledge. See F.R.E. 602.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Provisions 5, 6, 7, 8, 9 and 11 of the Independent Contractor Agreement (the "ICA") all violate N.Y. LAB. Law §§ 193 and 198-b because they impose what amounts to unlawful deductions from Plaintiff's wages and/or require illegal "kick-backs" from Plaintiff's lawful wages.

Provision 10 violates N.Y. LAB. Law §§ 190(2) and 862-b because Plaintiff performed labor, work and services for the Defendants both factually and legally as an "employee" but was unlawfully misclassified as an "independent contractor".

Provision 16 is not enforceable because it is not reasonable. The Provision is not necessary to protect HDL or Sears' legitimate business interests and it seeks to cause financial undue hardship on the Plaintiff.

Provision 17 is unenforceable pursuant to Section 1 of the Federal Arbitration Act and the Supreme Court precedent of New Prime Inc. v. Oliveira, 139 S.Ct. 532 (2019).

Provision 20 is contrary to public policy and the remedial nature of New York's labor laws.

5. During the time you contracted with HDL, did you contract with or were you also employed by any other business entity or individuals? If so, list the applicable business entity or individuals' names, addresses and dates of contract or employment.

**OBJECTIONS:** See all General Objections.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** No.



6. Identify each and every person who assisted you and/or Kloppel Deliveries in providing services for HDL, including his or her dates of service, whether you hired him or her; and the amount of compensation that you and/or Kloppel Deliveries paid to him or her.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory is vague and confusing as the phrase "assisted ... in providing services for HDL" is not defined and therefore this Interrogatory susceptible to ambiguous, differing or unclear answers.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff worked with Mike Rex and James Lochner of HDL; Jerry "Doe" (last name unknown) of Sears; and Emanuel Santiago, Mike Watlik, Nick Rhinebauld, Wilson Rodriguez, Hector Rivera, Wade "Doe", Jacob "Doe", Felix "Doe", Kevin "Doe" and Desoto "Doe" of Kloppel Deliveries, LLC.

7. If you ever obtained for-hire motor carrier operating authority from the Federal Motor Carrier Safety Administration for you or any entity controlled by you, state the date on which you applied for the authority, the name of the person or entity on whose behalf you applied for the authority, and whether the authority was granted.

**OBJECTIONS:** See all General Objections. Further objections that this Interrogatory seeks information of no relevance to this action, is not probative of any issue in dispute and is not reasonably calculated to lead the discovery of admissible evidence.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Motor Property Common Carrier authority was granted for Kloppel Deliveries LLC on October 29, 2014. Household Goods Contract Carrier authority was granted for Kloppel Deliveries LLC on May 10, 2016.

8. Identify the number of vehicles you owned, leased, rented, or operated in the course of performing services for HDL, including the make, model, year, and beginning and ending dates of your ownership, lease, rental, or operation of the vehicle.

**OBJECTIONS:** See all General Objections. Further objections that this Interrogatory seeks information of no relevance to this action, is not probative of any issue in dispute and is not reasonably calculated to lead the discovery of admissible evidence.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff rented a 2001 International 4900, 2008 International 4900 and 2008 Freightliner M2-106. All rentals were from Penske Truck Leasing Co., L.P., Ryder System, Inc. and Enterprise Holdings, Inc.

9. Identify each and every document evidencing the kickback(s), deduction(s), charge(s), or expense(s) identified in response to Interrogatory Nos. 1 and/or 2, including any written authorizations that you signed for the deductions, charges, or expenses.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify documents which support legal conclusions of which he may not have personal knowledge of. Further objection on the ground that this Interrogatory improperly and erroneously assumes that Plaintiff had a duty or legal obligation to record all of Defendants' improper kickbacks, deductions, charges and/or expenses. The Interrogatory is therefore based upon a faulty premise. Defendants, *and not Plaintiff*, were legally obligated to create, keep, maintain and preserve accurate payroll and other records which accurately identified all deductions, charges and expenses incurred by Plaintiff in performing work for them. See N.Y. LAB. Law § 195; 29 U.S.C. § 211(c); and 29 C.F.R. § 516.2, et seq.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Pursuant to Fed. R. Civ. P. 33(d), Plaintiff answers that HDL can determine a responsive answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped KLOPPEL 000001 through KLOPPEL 000419 for discovery purposes. Plaintiff did not authorize any of the deductions, charges or expenses he is claiming as compensable damages for in this action.

10. The facts supporting your contention in the Complaint that you were misclassified as an independent contractor of HDL.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify facts which support a legal conclusion of which he may not have personal knowledge of.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Sears and HDL exhibited a high degree of direction and control over the means and manner in which Plaintiff performed his delivery services for the Defendants; Plaintiff did not own or lease the goods he delivered for Defendants and he was not entitled to the "profits" derived from those deliveries; Plaintiff was expected to exclusively provide delivery services for HDL and Sears; Sears and HDL required Plaintiff to dress in specific clothing that gave customers the clear impression he was a Sears employee; Plaintiff was required to perform his delivery services in conformance with HDL and Sears' procedures, practices and requirements; in performing his delivery services, Plaintiff's vehicles and equipment were required to display signs, placards or other identification devices to identify that the vehicle or equipment was operated on behalf of Defendants; Plaintiff was not permitted to freely provide delivery services for companies other than HDL and Sears. Plaintiff also refers

**HDL to Paragraphs 11 through 30 of Plaintiffs' First Amended Class Action Complaint for additional facts responsive to this Interrogatory.**

11. The facts supporting your contention in the complaint that HDL subjected you to improper deductions, charges, and/or expenses.

**OBJECTIONS:** See all General Objections. Further objection on the ground that this Interrogatory improperly seeks to compel a lay Plaintiff to identify facts which support a legal conclusion of which he may not have personal knowledge of.

*Without waiving said objections and specifically subject thereto, Plaintiff answers:*

**ANSWER:** Plaintiff refers HDL to Paragraphs 31 through 34 and 45 to 46 of Plaintiffs' First Amended Class Action Complaint for identification of the "facts" responsive to this Interrogatory. As documentary support for these "facts", pursuant to Fed. R. Civ. P. 33(d), Plaintiff also answers that HDL can determine a more specific answer to this Interrogatory by examining all responsive documents produced herewith and Bates-Stamped KLOPPEL 000001 through KLOPPEL 000419 for discovery purposes.



**FED. R. CIV. P. 26(g)(1)(A) SIGNATURE**

I, Ravi Sattiraju, Esq., attorney for Plaintiff Mike Kloppel, hereby certify that to the best of my knowledge, information and belief, formed after a reasonable inquiry, the above answers to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Mike Kloppel are complete and correct as of the time they have been made.

**THE SATTIRAJU LAW FIRM, P.C.**

*Attorneys for Plaintiffs, on behalf of themselves  
and all other similarly situated persons*

Date: April 15, 2019  
Princeton, New Jersey

BY: /s/ **Ravi Sattiraju**  
RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com

**FED. R. CIV. P. 26(g)(1)(B) SIGNATURE**

I, Ravi Sattiraju, Esq., attorney for Plaintiff Mike Kloppel, hereby certify that to the best of my knowledge, information and belief, formed after a reasonable inquiry and review of applicable case law, each objection I interposed above to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Mike Kloppel, is:

- (i) consistent with the Federal Rules of Civil Procedure and warranted by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law, or for establishing new law;
- (ii) not interposed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; and
- (iii) neither unreasonable nor unduly burdensome or expensive, considering the needs of the case, prior discovery in the case, the amount in controversy, and the importance of the issues at stake in the action.

**THE SATTIRAJU LAW FIRM, P.C.**

*Attorneys for Plaintiffs, on behalf of themselves  
and all other similarly situated persons*

Date: April 15, 2019  
Princeton, New Jersey

BY: /s/ Ravi Sattiraju  
RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com

**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that a true and accurate copy of the foregoing Plaintiff's Objections and Answers to Defendant HomeDeliveryLink, Inc.'s First Set of Interrogatories to Plaintiff Mike Kloppel was served on this, the 15th day of April 2019, upon the following counsel of record for the Defendants:

<b><u>For Defendant HDL:</u></b>	<b><u>For Defendant Sears</u></b>
Andrew J. Butcher, Esq. (Admitted <i>Pro Hac Vice</i> ) SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C. 30 W. Monroe Street, Suite 600 Chicago, Illinois 60603 (Via Regular and Electronic Mail; and	Brendan T. Killeen, Esq. MORGAN, LEWIS & BOCKIUS, LLP 101 Park Avenue New York, New York 10178 (Via Electronic Mail Only); and
Chip Andrewsavage, Esq. (Admitted <i>Pro Hac Vice</i> ) SCOPELITIS, GARVIN, LIGHT, HANSON & FEARY, P.C. 30 W. Monroe Street, Suite 600 Chicago, Illinois 60603 (Via Electronic Mail Only); and	Michael J. Puma, Esq. MORGAN, LEWIS & BOCKIUS, LLP 1701 Market Street Philadelphia, Pennsylvania 19103 (Via Electronic Mail Only).
Rodney O. Personius, Esq. PERSONIUS MELBER LLP 2100 Main Place Tower Buffalo, New York 14202 (Via Electronic Mail Only).	

Date: April 15, 2019  
Princeton, New Jersey

**s/ Ravi Sattiraju**

RAVI SATTIRAJU, ESQ.  
116 Village Boulevard, Suite 200  
Princeton, New Jersey 08540  
(P): (609) 799-1266  
(F): (609) 228-5649  
(E): rsattiraju@sattirajulawfirm.com



# **EXHIBIT 5**

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF NEW YORK**

MIKE KLOPPEL and ADAM WILSON, on  
behalf of themselves and all other similarly  
situated persons,  
Plaintiffs,  
v.  
SEARS HOLDING CORPORATION, SEARS,  
ROEBUCK & COMPANY and  
HOMEDELIVERYLINK, INC.  
Defendants.

Case No. 6:17-cv-06296-FPG-JWF

**PLAINTIFF DAVID TRAINA’S RESPONSES TO DEFENDANT’S FIRST SET OF  
INTERROGATORIES**

Pursuant to Rules 26 and 33 of the Federal Rules of Civil Procedure, Plaintiff David Traina hereby responds to the interrogatories propounded by Defendant Homedeliverylink (“Defendant” or “HDL”). Plaintiff reserves his right and will meet his obligation, pursuant to Fed. R. Civ. P. 26(e), to supplement his responses if and when necessary.

**GENERAL OBJECTIONS**

1. Plaintiff objects to Defendant’s requests to the extent that they seek information that is protected from disclosure under the work product doctrine, or which are subject to the attorney-client privilege.
2. Plaintiff objects to Defendant’s requests to the extent they contain vague, ambiguous, conclusory, or undefined terms, or fail to not identify the requested information with reasonable particularity.
3. Plaintiff objects to Defendant’s requests to the extent that they seek information that are not in Plaintiff’s possession, custody, or control, or which are more readily obtainable from some other source that is less burdensome or expensive.
4. Plaintiff objects to Defendant’s requests to the extent that they are overly broad, unreasonable in scope, unduly burdensome, or seek information that is already in Defendant’s

possession, custody, or control.

5. Plaintiff objects to Defendant's requests to the extent that they seek information not relevant to the claims and defenses in this action or which is not reasonably calculated to lead to the discovery of admissible evidence.

Each of these general objections is hereby deemed to be expressly incorporated into each response set forth below. Plaintiff reserves the right to supplement his responses to this First Set of Interrogatories as necessary.

### **RESPONSES**

**INTERROGATORY NO. 1:** For each work week in which You contend HDL subjected You to improper deductions, charges and/or expenses as alleged in the Complaint, Identify:

- a. The dates of the work week;
- b. The amount of the improper deductions, charges and/or expenses;
- c. The amount You were paid;
- d. The amount You claim You are owed.

### **ANSWER:**

Plaintiff objects to this interrogatory on the grounds that it is unduly burdensome and overly broad to the extent that it seeks information that is outside the relevant statute of limitations. Plaintiff further objects on the grounds that Defendant is merely seeking information it already possesses, such as the amount it paid Plaintiff and the amounts HDL deducted from his compensation. Subject to and without waiving his objections, Plaintiff will produce the records HDL has produced showing the deductions it made from his pay.

**INTERROGATORY NO. 2:** During the time You and/or Contract Carrier contracted with HDL, did You and/or Contract Carrier contract with or were You also employed by any other business entity or individuals? If so, list the applicable business entity or individuals' names,



addresses, and dated of contract of employment.

**ANSWER:**

In approximately 2016 and 2017, Plaintiff contracted with NFM and Spirit Delivery at the same time that he contracted with HDL.

**INTERROGATORY NO. 3:** Identify each and every person who assisted You in providing services for HDL, including his or her dates of service, whether You hired him or her, and the amount of compensation that You and/or Contract Carrier paid to him or her.

**ANSWER:**

Plaintiff objects to this interrogatory on the grounds that it is unduly burdensome. Plaintiff further objects to this interrogatory on the grounds that seeks a legal conclusion regarding the contested issue of whether Plaintiff or HDL hired helpers to perform deliveries. Subject to and without waiving his objections, Plaintiff states that he used Cedric Maxwell as a helper and paid him approximately \$500 per week.

**INTERROGATORY NO. 4:** If You ever obtained for-hire motor carrier operating authority from the Federal Motor Carrier Safety Administration for You or any entity controlled by You, state the date on which You applied for the authority, the name of the person or entity on whose behalf You applied for the authority, whether the authority was granted, and when You stopped operating under such authority.

**ANSWER:**

HDL required Plaintiff to obtain a DOT and NT number for Traina Services, LLC and still uses those numbers up to the present.

**INTERROGATORY NO. 5:** Identify the number of vehicles You and/or Contract Carrier owned, leased, rented, or operated in the course of performing services for HDL, including the make, model, year, and beginning and ending dates of Your ownership lease, rental, or operating of

the vehicle.

**ANSWER:**

Plaintiff leased trucks through Budget. The trucks were Internationals.

As to Responses:

05/10/2021

Signed under the pains and penalties of perjury on \_\_\_\_\_.

*DAVID STRAINA*

---

David Traina

Date: May 10, 2021

Respectfully submitted,

*On behalf of Plaintiffs Mike Kloppel and  
Adam Wilson and on behalf of themselves  
and all other similarly situated persons,*

By: /s/ Benjamin Weber  
Harold L. Lichten, Esq.  
Benjamin J. Weber, Esq.  
**LICHTEN & LISS-RIORDAN, P.C.**  
729 Boylston Street, Suite 2000  
Boston, Massachusetts 02116  
P: (617) 994-5800  
F: (617) 994-5801  
hlichten@llrlaw.com  
bjweber@llrlaw.com

Samuel Alba, Esq.  
**FRIEDMAN & RANZENHOFER, P.C.**  
74 Main Street  
P.O. Box 31  
Akron, New York 14001  
P: (716) 542-5444  
F: (716) 542-4090  
sam@legalsurvival.com

Ravi Sattiraju, Esq. (Anticipated *Pro Hac  
Vice*)  
Anthony S. Almeida, Esq. (Anticipated *Pro  
Hac Vice*)  
**SATTIRAJU & THARNEY, LLP**  
50 Millstone Road  
Building 300, Suite 202  
East Windsor, New Jersey 08520  
P: (609) 469-2110  
F: (609) 228-5649  
rsattiraju@s-tlawfirm.com  
aalmeida@s-tlawfirm.com

### **CERTIFICATE OF SERVICE**

I hereby certify that on May 10, 2021, a copy of this document was served by electronic mail on counsel of record for defendant.

/s/ Benjamin Weber  
Benjamin J. Weber, Esq.



# **EXHIBIT 6**

















# **EXHIBIT 7**

LAW OFFICE OF PETER A. ROMERO PLLC  
Peter A. Romero, Esq.  
103 Cooper Street  
Babylon, New York 11702  
Tel. (631) 257-5588  
promero@romerolawny.com

*Attorney for Plaintiff*

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

-----X  
CARLOS H. ROMERO, on behalf of himself and  
on behalf of all other persons similarly situated,

Plaintiff,

**COMPLAINT**

-against-

GARRIDO COMPANY TRUCK, INC. and  
IVAN W. GARRIDO, Individually,

Defendants.  
-----X

Plaintiff, CARLOS H. ROMERO, on behalf of himself and on behalf of all other persons  
similarly situated, by and through his attorney, Peter A. Romero, Esq., complaining of the  
Defendants, allege as follows:

**NATURE OF THE ACTION**

I. Plaintiff brings this action to recover unpaid minimum and overtime wages that  
Defendants owe him and similarly situated current and former employees of Defendants under the  
Fair Labor Standards Act, 29 U.S.C. §201 et seq., ("FLSA"), and the New York Labor Law  
Articles 6 and 19, §650 et seq., and the supporting New York State Department of Labor  
Regulations, 12 N.Y.C.R.R. Part 142 ("NYLL").



### **JURISDICTION AND VENUE**

2. This Court has subject matter jurisdiction pursuant to 28 U.S.C. §§1331 and 1337 and supplemental jurisdiction over Plaintiffs' state law claims pursuant to 28 U.S.C. §1367.

3. In addition, the Court has jurisdiction over Plaintiff's claims under the FLSA pursuant to 29 U.S.C. §216(b).

4. Venue is proper in the Eastern District of New York pursuant to 28 U.S.C. §1391.

5. Defendants do business in the State of New York, within the Eastern District of New York, and maintain places of business at 70 Marcus Drive, Melville, New York and 265 East 17<sup>th</sup> Street, Huntington Station, New York.

### **PARTIES**

6. The Plaintiff, CARLOS H. ROMERO, is a resident of the County of Suffolk, State of New York.

7. At all times relevant to the complaint, Plaintiff, CARLOS H. ROMERO, was an "employee" within the meaning of Section 3(e) of the FLSA, 29 U.S.C. §203(e), and New York State Labor Law §190(2).

8. Plaintiff, CARLOS H. ROMERO, was a non-exempt employee of Defendants from in or about 2012 until in or about October 2016.

9. Upon information and belief, Defendant GARRIDO COMPANY TRUCK, INC., was and still is a domestic business corporation organized and existing pursuant to the laws of the State of New York owned by the Defendant, IVAN W. GARRIDO (collectively "Defendants").

10. At all times relevant, GARRIDO COMPANY TRUCK, INC. was and still is an "employer" within the meaning of Section 3(d) of the FLSA, 29 U.S.C. §203(d), and New York State Labor Law §190(3).

11. At all times relevant, the Defendant, IVAN W. GARRIDO, was and still is the President or Chief Executive Officer of GARRIDO COMPANY TRUCK, INC.

12. At all times relevant, the Defendant, IVAN W. GARRIDO, was and still is the owner of GARRIDO COMPANY TRUCK, INC.

13. At all times relevant, the Defendant, IVAN W. GARRIDO, had authority to make payroll and personnel decisions for GARRIDO COMPANY TRUCK, INC.

14. At all times relevant, the Defendant, IVAN W. GARRIDO, was and still is active in the day to day management of GARRIDO COMPANY TRUCK, INC., including the payment of wages to the Plaintiff and determining what wages were paid to Plaintiff and employees similarly situated to Plaintiff.

15. At all times relevant, the Defendant, IVAN W. GARRIDO, exercised control over the terms and conditions of Plaintiff's employment in that he has the power to and does: hire and fire employees, determine and approve rates and methods of pay, determine and approve work schedules, supervise and control the work of the employees, and otherwise affect the quality of the employees' employment.

16. At all times relevant, the Defendant, IVAN W. GARRIDO, was and still is an "employer" within the meaning of federal and state wage and hour laws.

#### **FACTS**

17. Upon information and belief, Defendants provide trucking and furniture delivery services.

18. Upon information and belief, Defendants own and/or lease approximately 20 box trucks, as well as vans, and employer drivers and helpers.

19. Upon information and belief, Defendants provide trucking and delivery services to Bob's Furniture of NY, LLC.

20. Plaintiff was employed as a driver by Defendants from in or about 2012 until on or about October 2016.

21. As a driver, Plaintiff made approximately 15 furniture delivery stops on Long Island each workday. Plaintiff never delivered furniture to locations outside of New York State and he was not likely to be called upon to travel out-of-state.

22. Plaintiff regularly worked Tuesday through Saturday.

23. Each workday, Plaintiff reported for work at 5:40 a.m. at Defendants' trucking facility, where he received his route of furniture deliveries for the day.

24. There was no fixed time at which Plaintiff finished work each day, since the number and location of delivery stops varied, as did the length of time required to complete each delivery.

25. Plaintiff often did not finish making deliveries until 6:00 p.m. and sometimes until 8:00 p.m.

26. Plaintiff was required to return to Defendants' trucking facility after he completed his last delivery stop to unload any furniture returned by customers and to load the truck for the following day.

27. For example, Plaintiff worked more than 40 hours in the following weeks:

a. during the week beginning May 20, 2016, Plaintiff delivered furniture from 6:00 a.m. until 4:00 p.m. on Tuesday; from 6:00 a.m. until 6:00 p.m. on Wednesday; from 6:00 a.m. until 6:00 p.m. on Thursday; from 6:00 a.m. until 5:00 p.m. on Friday; and from 6:00 a.m. until 5:00 p.m. on Saturday;



b. during the week beginning June 6, 2016, Plaintiff delivered furniture from 6:00 a.m. until 4:00 p.m. on Tuesday; from 6:00 a.m. until 8:00 p.m. on Wednesday; from 6:00 a.m. until 5:00 p.m. on Thursday; from 6:00 a.m. until 8:00 p.m. on Friday; and from 6:00 a.m. until 5:00 p.m. on Saturday;

c. during the week beginning June 13, 2016, Plaintiff delivered furniture from 6:00 a.m. until 7:00 p.m. on Tuesday; from 6:00 a.m. until 3:00 p.m. on Wednesday; from 6:00 a.m. until 3:00 p.m. on Thursday; from 6:00 a.m. until 8:00 p.m. on Friday; and from 6:00 a.m. until 6:00 p.m. on Saturday;

d. during the week beginning June 20, 2016, Plaintiff delivered furniture from 6:00 a.m. until 7:00 p.m. on Tuesday; from 6:00 a.m. until 4:00 p.m. on Wednesday; from 6:00 a.m. until 4:00 p.m. on Thursday; from 6:00 a.m. until 4:00 p.m. on Friday; and from 6:00 a.m. until 5:00 p.m. on Saturday.

28. Throughout his employment with Defendants, Plaintiff regularly worked more than 40 hours in a workweek.

29. Plaintiff worked more than 40 hours in most workweeks in which he was employed by Defendants.

30. On most workdays, Plaintiff worked more than 10 hours in a single workday.

31. Defendants had control over the conditions of Plaintiff's employment, work schedule, the rates and methods of payment of Plaintiff's wages and the maintenance of his employment records.

32. Defendants paid Plaintiff a fixed daily regardless of the actual number of hours Plaintiff worked each workweek.

33. Plaintiffs and other similarly situated drivers and helpers worked more than forty hours in most workweeks in which they were employed by the Defendants but were not paid overtime pay.

34. Defendants failed to pay Plaintiff and other similarly situated drivers and helpers a premium for time worked more than 40 hours per week throughout the entire term of Plaintiff's employment with the Defendants.

35. Plaintiff and other similarly situated drivers and helpers regularly worked more than 10 hours in a single workday.

36. Defendants failed to pay Plaintiff and other similarly situated drivers and helpers spread-of-hours pay for each day in which their spread of hours exceeded 10 hours.

37. Defendants did not use a punch card timeclock, digital scan system, or other means to verify the time Plaintiff began and ended work each day.

38. Defendants willfully disregarded and purposefully evaded record keeping requirements of the FLSA and the NYLL by failing to maintain accurate records of the hours worked by and wages paid to Plaintiff and similarly situated drivers and helpers.

39. Defendants unlawfully failed to pay Plaintiff and other similarly situated drivers and helpers proper compensation in violation of NYLL Article 6, 190 et seq. and the supporting New York State Department of Labor Regulations, 12 N.Y.C.R.R. Part 142.

40. Defendants made unlawful deductions from Plaintiff's wages including deductions to recoup the cost of traffic and/or parking tickets; deductions for damage sustained to Defendants' trucks; and deductions for truck loading fees in violation of NYLL §193.

41. From in or about 2015 through October 2016, Defendants misclassified Plaintiff as an "independent contractor" and failed to withhold and remit the appropriate Social Security and